

सरकारी गजट, उत्तराखण्ड

उत्तराखण्ड सरकार द्वारा प्रकाशित

रुड़की

खण्ड-21] रुड़की, शनिवार, दिनांक 07 नवम्बर, 2020 ई0 (कार्तिक 16, 1942 शक सम्वत्) [संख्या-40

विषय—सूची

प्रत्येक भाग के पृष्ठ अलग-अलग दिये गए हैं, जिससे उनके अलग-अलग खण्ड बन सके

| विषय | पृष्ठ संख्या | वार्षिक चन्द |
|---|--------------|--------------|
| | | ₹0 |
| सम्पूर्ण गजट का मूल्य | <u>-</u> * | 3075 |
| नाग 1—विञ्चप्ति—अवकाश, नियुक्ति, स्थान—नियुक्ति, स्थानान्तरण, | | |
| अधिकार और दूसरे वैयक्तिक नोटिस | 1239-1253 | 1500 |
| गग 1-क-नियम, कार्य-विधियां, आज्ञाएं, विज्ञप्तियां इत्यादि जिनको | | |
| उत्तराखण्ड के राज्यपाल महोदय, विभिन्न विभागों के | - | |
| अध्यक्ष तथा राजस्व परिषद् ने जारी किया | 447-481 | 1500 |
| ाग 2—आज्ञाएं, विज्ञप्तियां, नियम और नियम विधान, जिनको केन्द्रीय | | |
| सरकार और अन्य राज्यों की सरकारों ने जारी किया, हाई | | |
| कोर्ट की विज्ञाप्तियां, भारत सरकार के गजट और दूसरे | | |
| राज्यों के गजटों के उद्धरण | | 975 |
| ाग 3—स्वायत्त शासन विभाग का क्रोड़-पत्र, नगर प्रशासन, नोटीफाइड | | |
| ्एरिया, टाउन एरिया एवं निर्वाचन (स्थानीय निकाय) तथा | | |
| पंचायतीराज आदि के निदेश जिन्हें विभिन्न आयुक्तों | | |
| अथवा जिलाधिकारियों ने जारी किया | - | 975 |
| ।।ग 4—निदेशक, शिक्षा विभाग, उत्तराखण्ड | | 975 |
| ाग 5-एकाउन्टेन्ट जनरल, उत्तराखण्ड | | 975 |
| ाग 6-बिल, जो भारतीय संसद में प्रस्तुत किए गए या प्रस्तुत किए | • | |
| जाने से पहले प्रकाशित किए गए तथा सिलेक्ट कमेटियों | | |
| की रिपोर्ट | | 975 |
| ाग 7—इलेक्शन कमीशन ऑफ इण्डिया की अनुविहित तथा अन्य | | |
| निर्वाचन सम्बन्धी विज्ञप्तियां | | 975 |
| गाग 8-सूचना एवं अन्य वैयक्तिक विज्ञापन आदि | 335 | 975 |
| टोर्स पर्चेज-स्टोर्स पर्चेज विमाग का क्रोड़-पत्र आदि | _ | 1425 |

भाग 1

विज्ञप्ति—अवकाश, नियुक्ति, स्थान—नियुक्ति, स्थानान्तरण, अधिकार और दूसरे वैयक्तिक नोटिस सूक्ष्म, लघु एवं मध्यम उद्यम अनुभाग

कार्यालय-ज्ञाप

28 सितम्बर, 2020 ई0

संख्या 1621/VII-3-20/146—एम0एस0एम0ई0/2013 टी०सी० 03—वर्तमान में उत्तराखण्ड राज्य में औद्योगिक इकाईयों को प्रोत्साहन हेतु प्रदेश की सूक्ष्म, लघु एवं मध्यम उद्यम नीति—2015 (यथासंशोधित—2016, 2018 व 2019) तथा उसमें प्रवत्त वितीय प्रोत्साहनों की अनुमन्यता के लिए शासन की अधिसूचना दिनांक 03 दिसम्बर, 2015 से प्रख्यापित सूक्ष्म, लघु एवं मध्यम उद्यम क्रियान्वयन आदेश—2015 में भारत सरकार की अधिसूचना संख्या—का०आ० 1702(अ) दिनांक 01 जून, 2020 द्वारा सूक्ष्म, लघु एवं मध्यम उद्यम की परिभाषा परिवर्तन के अनुरूप उक्त नीति व क्रियान्वयन आदेश के परिभाषा शीर्षक में निम्नानुसार संशोधन किये जाने की श्री राज्यपाल महोदय सहर्ष स्वीकृति प्रदान करते हैं।

2. सूक्ष्म, लघु एवं मध्यम उद्यम नीति तथा क्रियान्वयन आदेश—2015 में परिभाषा शीर्षक में स्तम्भ—1 के स्थान पर स्तम्भ—2 में दिये गये प्राविधान रख दिये जायेंगे अर्थात् :—

| , | | स्तम्म-1 | | स्तस्म-2 | | | |
|------|------------------|---|-----------------------------------|---|--|--|--|
| 30.7 | | वर्तमान प्राविधान | एतद्द्वारा प्रतिस्थापित प्राविधान | | | | |
| П | विनिम | णक/उत्पादक उद्यम:- | (a) | सूक्ष्म उद्यम वह है जिसमें संयंत्र और मशीनरी | | | |
| | (ক) | एक सूक्ष उद्यम, जहां संयंत्र और मशीनरी में विनिधान पच्चीस लाख रूपये से अधिक न हो। | | अथवा उपस्कर में एक करोड़ रूपये से अधिक का निवेश नहीं होता है तथा उसका कारोबार पांच करोड़ रूपये से अधिक नहीं होता हैं। | | | |
| | (ख) | एक लघु उद्यम, जहां संयंत्र और मशीनरी में विनिधान पच्चीस लाख रूपए से अधिक हो किन्तु पांच करोड़ से अधिक न हो, या | (ख) | लघु उद्यम वह है जिसमें संयंत्र और मशीनरी अथवा उपस्कर में दस करोड़ रूपये से अधिव का निवेश नहीं होता है तथा उसका कारोबा पचास करोड़ रूपये से अधिक नहीं होता है। | | | |
| | (ग) | एक मध्यम उद्यम, जहां संयंत्र और मशीनरी में विनिधान पांच करोड़ रूपए से अधिक हो परन्तु दस करोड़ रूपए से अधिक न हो। | | मध्यम उद्यम वह है जिसमें संयंत्र और मशीनर अथवा उपस्कर में पचास करोड़ रूपये से अधिव का निवेश नहीं होता है तथा उसका कारोबा दो सौ पचास करोड़ रूपये से अधिक नहीं होत | | | |
| Ш | सेवा | प्रदाता उद्यमः- | | है। | | | |
| | (क) | एक ऐसे सूक्ष्म उद्यम के रूप में जह उपकरण में विनिधान दस लाख रूपरे से अधिक न हो, | | | | | |
| _ | (ख) | | i | | | | |

| | | उपकरण में विनिधान दस लाख रूपए से अधिक हो किन्तु दो करोड़ रूपये | : | 1 | |
|---|-----|---|-----|---|--|
| - | | से अधिक न हो, या | 0.0 | | |
| | (ग) | एक ऐसे मध्यम उद्यम के रूप में जहां | | | |
| | | उपकरण में विनिधान दो करोड़ रूपये | | | |
| | | से अधिक हो किन्तु पांच करोड़ से | | | |
| | | अधिक न हो। | | | |

- 3. उक्त संशोधित नीति की नयी परिभाषा 01 जुलाई, 2020 से लागू मानी जायेगी।
- 4. उत्तराखण्ड सूक्ष्म, लघु एवं मध्यम उद्यम नीति एवं क्रियान्वयन आदेश–2015 उपरोक्त सीमा तक संशोधित समझा जाय। नीति में शेष प्राविधान यथावत रहेंगे।

आज्ञा से, मनीषा पंतार, अपर मुख्य सचिव।

वन अनुभाग-02

अधिसूचना

05 अक्टूबर, 2020 ई0

संख्या 1710/X-2-2020—19(04) 2014 T.C.—मा० मुख्यमंत्री जी की अध्यक्षता में दिनांक 29 जून, 2020 को सम्पन्न उत्तराखण्ड राज्य वन्यजीव सलाहकार बोर्ड की 15वीं बैठक में लिये गये निर्णय तथा वन्य जीव (संरक्षण) अधिनियम, 1972 यथा संशोधित की धारा—7(2) के प्राविधानों के अन्तर्गत निम्न प्रकार राज्य वन्यजीव सलाहकार बोर्ड के सदस्यों में से 'स्थायी समिति' का गठन किए जाने की स्वीकृति श्री राज्यपाल सहर्ष स्वीकृति प्रदान करते हैं :—

| क.सं. | राज्य वन्यजीव सलाहकार बोर्ड की 'स्थायी समिति' | पद | अम्युक्ति |
|-------|--|---------|---|
| 1. | मा० वन एवं पर्यावरण मंत्री। | अध्यक्ष | |
| 2. | मा० सदस्य, विधान सभा, उत्तराखण्ड | सदस्य | मा० मुख्यमंत्री जी द्वारा नामित मा० विधान सभा सदस्य। |
| 3. | निदेशक, भारतीय वन्यजीव संस्थान अथवा उनके द्वारा नामित प्रतिनिधि। | सदस्य | |
| 4. | प्रमुख सचिव /सचिव वन, उत्तराखण्ड शासन। | सदस्य | |
| 5. | मुख्य कार्यकारी अधिकारी, उत्तराखण्ड पर्यटन विकास परिषद अथवा उनके द्वारा नामित प्रतिनिधि। | सदस्य | |
| 6. | सचिव, जनजाति कल्याण अथवा उनके द्वारा नामित प्रतिनिधि। | सदस्य | |

| 7. | मा० मुख्यमंत्री जी द्वारा नामित एक गैर सरकारी संगठन। | सदस्य | अधिकतम ०। वर्ष | |
|----|--|---------------|----------------|--|
| 8. | मा० मुख्यमंत्री जी द्वारा नामित एक सुविख्यात संरक्षण विज्ञानी, पारिस्थितिकी विज्ञानी और पर्यावरण विज्ञानी। | सदस्य | अधिकतम ०१ वर्ष | |
| 9. | मुख्य वन्यजीव प्रतिपालक, उत्तराखण्ड। | सदस्य सचिव | | |

- 2— उक्त स्थायी समिति की बैठक प्रतिमाह आयोजित की जायेगी। राष्ट्रीय वन्यजीव सलाहकार बोर्ड की स्थायी समिति को प्रेषित किये जाने वाले समस्त प्रकरणों को इस स्थायी समिति के समक्ष विचारार्थ प्रस्तुत किया जायेगा एवं इसके निर्णयोपरान्त अग्रेत्तर कार्यवाही की जायेगी।
- 3- स्थायी समिति के समस्त निर्णयो / बैठकों के कार्यवृत्त को आगामी राष्ट्रीय वन्यजीव सलाहकार बोर्ड की बैठक में संज्ञानार्थ / अनुमोदनार्थ / आदेशार्थ प्रस्तुत किये जायेंगे।
- 4- यह अधिसूचना गजट में प्रकाशित होने की तिथि से प्रवृत्त होगी।

आंज्ञा से,

आनन्द बर्द्धन, प्रमुख सचिव।

चिकित्सा स्वास्थ्य एवं चिकित्सा शिक्षा अनुभाग-05

अधिसूचना

<u>प्रकीर्</u>ण

28 सितम्बर, 2020 ई0

संख्या 1065/XXVIII(5)/20—22 (सामान्य)/2015—राज्यपाल "भारत का संविधान" के अनुच्छेद 309 के परन्तुक द्वारा प्रदत्त शक्तियों का प्रयोग करते हुए उत्तराखण्ड चिकित्सा शिक्षा विभाग (मेडिकल कॉलेज) निर्संग संवर्ग (अराजपत्रित) सेवा नियमावली, 2020 में संशोधन करने की दृष्टि से निम्नलिखित नियमावली बनाते है :--

उत्तराखण्ड चिकित्सा शिक्षा विभाग (मेडिकल कॉलेज) नर्सिंग संवर्ग (अराजपत्रित) (संशोधन) सेवा नियमावली. 2020

भाग-1 - सामान्य

- संक्षिप्त नाम 1 (1) इस नियमावली का संक्षिप्त नाम उत्तराखण्ड चिकित्सा शिक्षा विभाग (मेडिकल कॉलेज) नर्सिंग संवर्ग और प्रारम्भ (अराजपत्रित) सेवा नियमावली (संशोधन), 2020 है। (2) यह तुरन्त प्रवृत्त होगी।
- नियम 5(ख) 2 उत्तराखण्ड चिकित्सा शिक्षा विभाग (मेडिकल कॉलेज) नर्सिंग संवर्ग (अराजपत्रित) सेवा नियमावली, का 2020 (जिसे यहाँ आगे मूल नियमावली कहाँ गया है) में नीचे स्तम्भ 1 में दिये गये विद्यमान नियम संशोधन 5(ख) के स्थान पर स्तम्भ 2 में दिया गया नियम रख दिया दिया जाएगा, अर्थात:—

स्तम्म-1

विद्यमान नियम

एतदद्वारा प्रतिस्थापित नियम

5(ख) स्टाफ नर्स : शत-प्रतिशत सीधी भर्ती द्वारा 5(ख) स्टाफ नर्स (उपचारिका): 80 प्रतिशत कुल पदों का 80 प्रतिशत महिला उपचारिका और महिला अभ्यर्थियों में से तथा 20 प्रतिशत पद पुरूष 20 प्रतिशत पुरूष उपचारक होंगे। चयन वर्ष में अभ्यर्थियों में से सीधी भर्ती द्वारा, चयन वर्ष में महिला / पुरूष उपचारिकाओं / उपचारकों के कुल महिला / पुरूष उपचारिकाओं / उपचारकों के कुल उपलब्ध रिक्त पदों में से 70 प्रतिशत पद जनरल उपलब्ध रिक्त पद नर्सिंग में डिप्लोमाधारक/ नर्सिंग एवं मिडवाइफरी में डिप्लोमा धारक डिग्रीधारक अभ्यर्थियों में से भरे जायेंगे। अभ्यर्थियों तथा 30 प्रतिशत पद नर्सिंग में डिग्री

धारक अभ्यर्थियों से भरे जायेंगे। मूल नियमावली के नियम 8 के स्तम्भ-1 के स्थान पर स्तम्भ-2 में दिया गया नियम रख दिया जायेगा, नियम अर्थात:— का संशोधन

स्तम्म-1

विद्यमान नियम

अभ्यर्थी के पास निम्न अर्हताएँ होनी आवश्यक है अभ्यर्थी के पास निम्न अर्हताएँ होनी आवश्यक है

स्टाफ नर्स:-

- माध्यमिक शिक्षा परिषद, उत्तराखण्ड से **(क)** इण्टरमिडिएट परीक्षा उत्तीर्ण सरकार द्वारा उसके समकक्ष मान्यता प्राप्त परीक्षा उत्तीर्ण होना चाहिए। इसके साथ ही किसी मान्यता प्राप्त संस्थान से जनरल नर्सिंग एवं मिडवाइफरी में डिप्लोमा अथवा बी०एस०सी० (नर्सिग) परीक्षा उत्तीर्ण की गयी हो।
- अभ्यर्थी के पास उत्तराखण्ड नर्स तथा धात्री परिषद में रजिस्ट्रीकरण के योग्य जनरल नर्सिंग एवं मिडवाइफरी का डिप्लोमा अथवा बी०एस०सी० नर्सिंग की डिग्री हो। बी०एस०सी० नर्सिंग के डिग्रीधारकों के पास राज्य सरकार के चिकित्सा संकाय द्वारा मान्यता प्राप्त संस्थान से कम से केम 01 वर्ष का नर्सिंग कार्य का अनुभव होना (ख) आवश्यक है। 🍕
- (ग) नर्सिंग काउन्सिल, उत्तराखण्ड में रजिस्ट्रीकृत हो।

स्तम्म-2

एतदद्वारा प्रतिस्थापित नियम 8-सेवा में सीधी भर्ती के लिए यह आवश्यक है कि 8-सेवा में सीधी भर्ती के लिए यह आवश्यक है कि

स्टाफ नर्स:-

- (क) भारतीय नर्सिंग परिषद से मान्यता प्राप्त विश्वविद्यालय अथवा संस्थान से नर्सिंग में बी०एस०सी०(आनर्स), अथवा भारतीय नर्सिंग परिषद से मान्यता प्राप्त विश्वविद्यालय अथवा संस्थान से बीoएसoसीo नर्सिंग में नियमित पाठ्यकम अध्वता भारतीय नर्सिंग परिषद से मान्यता प्राप्त विश्वविद्यालय अथवा संस्थान से पोस्ट बेसिक बी०एस०सी० नर्सिंग अथवा भारतीय नर्सिंग परिषद से मान्यता प्राप्त **नंसिंग** एवं विश्वविद्यालय से जनरल मिडवाईफरी / मनोरोग विज्ञान का डिप्लोमा
 - ंउत्तराखण्ड/भारतीय नर्सिंग तथा धात्री परिषद् से बी०एस०सी० (आनर्स) अथवा बी०एस०सी० नर्सिंग अथवा पोस्ट बेसिक बी०एस०सी० नर्सिंग अथवा जनरल नर्सिंग एवं मिड्वाइफरी/मनोरोग विज्ञान के रूप में रजिस्ट्रीकरण का प्रमाण पत्र हो।
- (ग) किसी राजकीय चिकित्सालय अथवा नैदानिक (रजिस्ट्रीकरण और अधिनियम 2010) (2010 का अधि0सं 23) के अन्तर्गत रजिस्ट्री 30 शैय्यायुक्त निजी चिकित्सालय में न्यूनतम 01 वर्ष कार्य का अनुभव उक्त योग्यता को प्राप्त करने के उपरान्त हो.
- (घ) हिन्दी का कार्यसाधक ज्ञान हो।

नियम 16 4 मूल नियमावली के नियम 16 के नीचे स्तम्भ-1 में दिये गये विद्यमान नियम के स्थान पर स्तम्भ-2 में का संशोधन दिया गया नियम रख दिया जाएगा, अर्थात:--

स्तम्म-1

विद्यमान नियम

16—सेवा में सीधी भर्ती पदों पर भर्ती उत्तराखण्ड (लोक सेवा आयोग को क्षेत्र के बाहर) समूह 'ग' के पदों पर सीधी भर्ती प्रकिया नियमावली, 2008 , (समय—समय पर यथासंशोधित) में निहित उपबन्धों के अधीन उत्तराखण्ड अधीनस्थ सेवा चयन आयोग के माध्यम से की जायेगी।

स्तम्म-2

एतद्द्वारा प्रतिस्थापित नियम 16—नियुक्ति प्राधिकारी / चिकित्सा सेवा चयन बोर्ड सीधी भर्ती के लिए निम्नलिखित रिति से आवेदन पत्र का प्रारूप और रिक्तियाँ अधिसूचित करेगाः—

- क) न्यूनतम ऐसे दो दैनिक समाचार पत्रों में जिनका व्यापक परिचालन हो, विज्ञापन जारी करके,
- ख) कार्यालय के सूचना पट्ट पर सूचना चस्पा करके या रेडियों / दूरदर्शन अथवा अन्य रोजगार पत्र द्वारा विज्ञापन के माध्यम से।
- (ग) रोजगार कार्यालय को रिक्तियाँ अधिसूचित कर।
- (2) चयन के लिए लिखित परीक्षा 200 अंकों की वस्तुनिष्ठ प्रकार की होगी, जिसमें 100 अंक का एक प्रश्न पत्र निर्मंग से सम्बन्धित विषय से होगा तथा 100 अंक का दूसरा प्रश्न पत्र सामान्य हिन्दी, सामान्य ज्ञान एवं सामान्य अध्ययन का होगा। प्रश्न पत्र के मूल्यांकन में प्रत्येक सहीं उत्तर का एक अंक व प्रत्येक गलत उत्तर हेतु 1/4 ऋणात्मक अंक विया जायेगा।
- (3) लिखित परीक्षा की प्रश्न बुकलेट, परीक्षा के पश्चात, अभ्यर्थियों को अपने साथ ले जाने की अनुमति दी जायेगी।
- (4) लिखित परीक्षा के पश्चात, लिखित परीक्षा की उत्तरमाला (Answer Key) उत्तराखण्ड चिकित्सा सेवा चयन बोर्ड की वैबसाईट www.ukmssb.org पर प्रदर्शित की जायेगी या दैनिक समाचार पत्र में, जिसका व्यापक परिचालन है, पर प्रकाशित की जायेगी।
- (5) लिखित परीक्षा की उत्तरशीट (Answer Sheet) कार्बन प्रति के साथ डुप्लीकेट में होगी तथा डुप्लीकेट प्रति अभ्यर्थी को अपने साथ ले जाने की अनुमति दी जायेगी।
- (6) लिखित परीक्षा के प्राप्तांकों की प्रवीण्ता सूची में अनारक्षित व अन्य पिछडा वर्ग के अभ्यर्थियों की दशा में न्यूनतम 45 प्रतिशत अंक तथा अनुसचित जाति एवं अनुसूचित जनजाति श्रेणी के अभ्यर्थियों की दशा में न्यूनतम 35 प्रतिशत अंक प्राप्त किये अभ्यर्थियों को ही सम्मिलित किया जायेगा।

- (7) नैदानिकी स्थापन (रिजस्ट्रीकरण और विनियमन) अधिनियम, 2010 (2010 का अधि०सं० 23) (सम्बन्धित राज्य में यथाप्रवृत्त) के अन्तर्गत पंजीकृत चिकित्सा संस्थान से परिशिष्ट—ग के अनुसार प्राप्त नर्सिंग का क्लीनिकल अनुभव प्रमाण पत्र रखने वाले अभ्यर्थी को प्रति वर्ष अनुभव के आधार पर न्यूनतम 01 अंक और अधिकतम 05 अंक निम्नलिखित प्रतिबन्धों एवं शर्तों के अधीन देय होंगे।
- (क) अनुभव न्यूनतम 01 वर्ष का होना चाहिये 01 वर्ष से कम की अवधि के अनुभव हेतु कोई भी अंक देय नहीं होगा, 01 वर्ष की अवधि का अनुभव पूर्ण होने के पश्चात प्रत्येक अतिरिक्त माह हेतु अंक का निर्धारण निम्नलिखित सूत्र के अनुसार होगा, तथा अनुभव के अंक, अनुभव के कुल माह की संख्या / 12 उदाहरण :—1 वर्ष 06 माह हेतु अनुभव के अंक का निर्धारण:—
- 01 वर्ष हेतु कुल अंक = 01
- 06 माह हेत् कुल अंक 6/12 = 0.5
- 01 वर्ष 08 माह हेतु कुल अंक = 1.5
- (ख) अभ्यर्थी द्वारा आवेदन पत्र के साथ प्रस्तुत नियोक्ता द्वारा अभ्यर्थी को प्रदत्त अनुभव प्रमाण पत्र में सम्बन्धित चिकित्सालय का उनके राज्य में यथाप्रवृत्त नैदानिकी स्थापन (रजिस्ट्रीकरण और विनियमन) अधिनियम, 2010 (2010 का अधि०सं० 23) (सम्बन्धित राज्य में यथाप्रवृत्त) के अन्तर्गत चिकित्सालय की पंजीकरण संख्या एवं दिनांक अंकित की गयी हो तथा नियोक्ता द्वारा अभ्यर्थी को चिकित्सालय में निर्मंग का क्लीनिकल कार्य किये जाने का स्पष्ट उल्लेख किया गया हो, जिसमें विभागों (यथा—सर्जरी/गायनी/बालरोग/आई०सी०यू०) इत्यादि, जहाँ अभ्यर्थी द्वारा कार्य किया गया हो, का भी उचित रूप से उल्लेख हो, नॉन क्लीनिकल कार्य हेतु अनुभव का कोई अंक प्रदान नहीं किया जायेगा, तथा
- (ग) अभ्यर्थी को आवेदन पत्र के साथ सम्पूर्ण अनुमव अवधि का न्योक्ता द्वारा आयकर अधिनियम के अन्तर्गत प्रदत्त फार्म—16 प्रस्तुत करना अनिवार्य होगा, अनुभव के अंक प्रदान किये जाने हेतु केवल उस अवधि की गणना की जायेगी जिस अवधि हेतु अभ्यर्थी द्वारा नियोक्ता द्वारा उसे प्रदत्त फार्म—18 प्रस्तुत किया गया हो।

(8) उत्तराखण्ड चिकित्सा सेवा चयन बोर्ड डिप्लोमा तथा डिग्रीधारक अभ्यर्थियों (महिला एवं पुरूष) की योग्यताकम में, जैसा कि उनके द्वारा लिखित परीक्षा एवं प्रस्तुत अनुभव प्रमाण पत्र में प्राप्त अकों से प्रकट हो, पृथक—पृथक सूचियां तैयार करेगा। यदि दो या अधिक अभ्यर्थी समान अक प्राप्त करे तो बोर्ड उनके नाम अभ्यर्थी की आयु, जिसकी जन्मतिथि पहले हो उसका नाम पहले, के

(9) सूची में नामों की संख्या रिक्तियों की संख्या से अधिक (किन्तु 25 प्रतिशत से अधिक नहीं) होगी। इस प्रकार तैयारी की गयी सूची केवल एक वर्ष के लिए मान्य होगी तथा जिसे प्रतिक्षा सूची कहा जायेगा। बोर्ड सूची में अपेक्षित संख्या में अभ्यर्थियों के नाम योग्यता कम में, नियुक्ति प्राधिकारी को अग्रसारित करेगा।

नियम 27 5 मूल नियमावली के नियम 27 में शब्द "अन्य पिछड़े का संशोधन वर्ग" के पश्चात् शब्द "आर्थिक रूप से कर्मजोर वर्ग" को अन्तः स्थापित कर दिया जायेगा /

परिशिष्ट — ग (नियम—16(7) देखें) चिकित्सालय का लैटर हैड

पत्र संख्या:--

दिनांक:-

—: अनुभव प्रमाण─पत्र :--

| | प्रमाणित किया जाता है कि श्री/श्रीमती/कु0 |
|------|---|
| | पुत्र/पुत्री/पत्नी |
| | निवासीइस चिकित्सालय में उपचारिका के पद पर |
| | कार्यरत है, साथ ही यह भी प्रमाणित किया जाता है कि (चिकित्सालय का नाम एवं पता जनपद |
| | सहित)वर्तमान में (शैय्याओं की |
| | संख्या)शैय्या युक्त है एवं (राज्य का नाम)राज्य में लागृ |
| | नैदानिक स्थापन (रजिस्ट्रीकरण और विनियम अधिनियम, 2010) के अन्तर्गत (कार्यालय का नाम जहाँ |
| | पंजीकृत है)में आतिथि तक वैध रूप से पंजीकृत है एवं चिकित्सालय |
| | का पंजीकरण संख्या—एवं दिनांकहै। |
| 2- | श्री / श्रीमती / कु0 द्वारा इस चिकित्सालय में कार्य किये जाने की अवधि |
| | में (विभाग का नाम)निर्संग का क्लीनिकल कार्य सम्पादित किया गया। |
| 3— | श्री/श्रीमती/कु0द्वारा क्लीनिकल स्टाफ नर्स के रूप में इस |
| | चिकित्सालय में कार्य किये जाने की अवधि (दिनांक)में |
| | (दिनांक)माह एवंमाह एवं |
| | दिन है तथा उन्हें उक्त अवधि का अनुभव प्रमाण-पत्र निर्गत किया जा रहा है। |
| 4 | श्री / श्रीमती / कु0को उक्त अनुभव अवधि का आयकर अधिनियम के अन्तर्गत |
| | फार्म-16 प्रदान कर दिया गया है। |
| 5— | उक्त अविध में श्री / श्रीमती / कुं0 |
| | पुत्र / पुत्री / पत्नीनवासीका |
| | कार्य एवं आचरणरहा है। |
| | हस्ताक्षरः— |
| _ | भव प्रमाण-पत्र निर्गत करने वाले सक्षम प्राधिकारी का नाम एवं पदनाम मुहर सहित (स्पष्ट पठनीय |
| अक्ष | रों में) (चिकित्सक होने की दशा में एम0सी0आई0 पंजीकरण संख्या) |

आज्ञा से,

अमित सिंह नेगी, सचिव। In pursuance of the provisions of clause (3) of Article 348 of "the Constitution of India", the Governor is pleased to order the publication of the following English translation of Notification No. 1065/XXVIII(5)/20-22 (General)/2015, dated September 28, 2020 for general information.

NOTIFICATION Miscellaneous

September 28, 2020

No. 1065/XXVIII(5)/20-22 (General)/2015--In exercise the powers conferred by the proviso of article 309 of "the Constitution of India", the Governor pleased to makes the following rules with a view to amend The Uttarakhand Medical Education Department Nursing Cadre (Non-Gazetted) Service Rules, 2020:--

The Uttarakhand Medical Education Department (Medical College) Nursing Cadre (Non-Gazetted) (Amendment) Service Rules, 2020

Short title and 1. Commencement

- (1) These rules may be called the Uttarakhand Medical Education Department(Medical College)
 Nursing Cadre (Non-Gazetted) Service
 (Amendment) Rules, 2020
- (1) They shall come into force at once.

Amendment of 2. rule 5

In the Uttarakhand Medical Education Department Nursing Cadre (Non-Gazetted) Service Rules, 2020 (hereinafter referred to as the principal Rules) for the existing sub-rule (b) of rule 5 as set out in column-1 below as set out in column-2, shall be substituted, namely:-

Column-1 Existing rule

Column-2 Rules hereby substituted

percent female candidate
Female Nurse and 20 percent
Male candidate Male nurse
shall be filled through Direct
Recruitment, out of total
available vacant seat of
female nurses / male nurses in

5(b) Staff Nurse(Upcharika)- 80 percent from female candidates and 20 percent post from male candidates shall be filled through Direct Recruitment from diploma holder/degree holder candidates in nursing, out of total available vacant female nurses / male nurses post in the selection year.

the selection year, 70 percent post from diploma holder candidates in nursing and 30 percent seats from degree holder candidates in nursing.

Amendment of Rule 8

3. In the principal Rules, for the existing rule 8 as set out in column-1 below as set out in column-2, shall be substituted, namely:-

Column-1 Existing rule

- 8. For Direct recruitment in the post of staff nurse the candidate:-
- have passed Should (a) Intermediate examination from Council of Secondary Education Uttarakhand or its recognized equivalent examination. As well as have passed Diploma in General Nursing and Midwifery or in 🕆 B.Sc. have degree (Nursing) from any recognized institution.
- for qualified To be registration in the Uttarakhand Nurses and Midwives Council, candidate shall Diploma in have Nursing and General Midwives or have Degree in

Column-2 Rules hereby substituted

- 8. For direct recruitment in the post of staff nurse the candidate must have;
 (a) B Sc. (Honors) in pursing from the
- (a) B.Sc. (Honors) in nursing from the University or Institute recognized from India Nursing Council or Regular course in B.Sc. nursing from the University or Institute recognized from Indian Nursing Council or Regular course in B.Sc. nursing from the University or Institute recognized from Indian Nursing Council or Post Basic B.Sc. nursing from the University or recognized from Indian Institute Nursing Council or Diploma of General Nursing and Midwives/Psychiatry from the University or Institute recognized from Indian Nursing Council.
- (b) Certificate of registration as a B.Sc. (Honors) or B.Sc. Nursing OR Post Basic B.Sc. Nursing or General Nursing and Midwives/Psychiatry from Uttarakhand/ Indian Nursing and Midwives Council

4.

B.Sc. Nursing. B.Sc. nursing degree holder must have minimum one year experience in nursing work from the institute recognized by State Government Medical faculty.

(c) Shall have registered from Uttarakhand Nursing Council.

Amendment of Rule 16

Column-1 Existing rule

16.-For Direct Recruitment on the post shall be made through the Uttarakhand **Subordinate Service Selection** Commission under the provision as vested in the Uttarakhand Procedure for Direct Recruitment for Group "C" Posts (Outside the purview of Uttarakhand Public Service Commission) Rules, 2020.

- (c) After acquiring said qualification shall have minimum one year work experience in any Government Hospital or 30 Bedded Private Hospital registered under Clinical Establishments (Registration and Regulation) Act, 2010, (Act No. 23 of 2010).
- (4) Shall have working knowledge of Hindi.
- In the principal Rules, for the existing rule 16 as set out in column-1 below as set out in column-2, shall be substituted, namely:-

Column-2 Rules hereby substituted

- 16.- (1) For Direct Recruitment Appointing Authority shall notify the format of application letter and vacancies in following manner:-
- (a) by issuing an advertisement in minimum two Daily News Papers which has wide circulation;
- (b) by pasting the notice in the Notice Board of office OR by advertising through Radio/ Doordarshan and other employment papers; and
- © by notifying the vacancies to Employment Office;
- (2) For selection the written examination shall be objective type of 200 marks, in which one question paper of 100 marks shall be of subject related to nursing and second question paper of 100 marks shall be of General Hindi, General Knowledge and General Studies. In evaluation of question paper

one marks for every correct answer and for every wrong answer ¼ negative marks shall be given.

- (3) Candidate shall be given permission to take the question booklet of written examination with him/her, after the examination.
- (4) After the written examination, the answer key of written examination shall be displayed in the Uttarakhand Medical Service Selection Board website www.ukmssb.org or shall be publish, in the daily news paper, which has wide circulation.
- (5) The answer sheet of written examination shall be in duplicate with a carbon copy and the permission shall be given to candidate to take the duplicate copy with him/her.
- (6) In case candidates of unreserved or other backward class minimum 45 percent marks and in case of Scheduled Caste and Scheduled Tribe category minimum 35 candidates percent marks shall be included in the Merit List of scores of written examination.
- (7) Subject to the following terms and conditions minimum 01 -mark and maximum 05 marks on the basis of per year experience shall be awarded to candidate who have clinical experience certificate of Nursing, as per the

Appendix "C", from the institution registered under the Clinical Establishments (Registration and Regulation) Act, 2010, (Act No. 23 of 2010) (as applicable in concerned State).

(a) Experience should be of minimum one year, for the experience of period less than one year, no mark shall be awarded, after completion of one year period experience, fixation of mark for each extra month shall be in accordance to following formula:- Marks of experience =Total number of month/12 Example:- Fixation of experience for 01 year, 06 months

Total marks for 01 year= 01

Total marks for 01 year= 01

Total marks for 6 months= 6/12=0.5

Total marks for 1 year 06 month= 1.5

(b) An experience certificate issued by the employer to the candidate and submitted by the candidate with application form, must have entry of the registration number of the Hospital under the Clinical Establishments (Registration and Regulation) Act, 2010, as applicable in the concerned State of concerned Hospital and the Date and the employer must have clearly mentioned the clinical work of nursing done by the candidate in the hospital, in which Departments (as-Surgery, Gyneo/ Paediatrics,/ICU etc., where candidate has done a work) properly mentioned. No mark shall be awarded for the experience of Non Clinical work.

- (c) It shall be mandatory for candidate to submit with application letter a Form-16 issued by the employer under Income Tax Act, for awarding marks of experience only that period shall be counted, for the period candidate has submitted Form-16 issued by employer.
- (8) The Uttarakhand Medical Service Board shall prepare separate lists of Diploma and Degree candidates (Male and Female) in Order of Merit, as appear from the marks they scored in written exam and from the marks obtained in the experience certificate. In case two or more candidate score equal mark, then, the Selection Board shall place the name in Order of Merit based on candidate age, whose date of birth is first his/her name first.
- (9) Number of names in list shall be more than the number of vacancies (but not more than 25 percent). The list prepared in this way shall be valid only for one year and which shall be called as waiting list. Board shall forward in required number the candidates name in order of merit to Appointing Authority.

Amendment of rule 27

In rule 27 of principal Rules, after the word "Other Backward Class" the words "Economically Weaker Sections" shall be inserted.

By Order,

AMIT SINGH NEGI,

Secretary.

पी०एस०यू० (आर०ई०) ४० हिन्दी गजट / 532-माग 1-2020 (कम्प्यूटर / रीजियो)।

5.



सरकारी गजट, उत्तराखण्ड

उत्तराखण्ड सरकार द्वारा प्रकाशित

रुड़की, शनिवार, दिनांक 07 नवम्बर 2020 ई0 (कार्तिक 16, 1942 शक सम्वत्)

भाग 1-क

नियम, कार्य-विधियां, आज्ञाएं, विज्ञप्तियां इत्यादि जिनको उत्तराखण्ड के राज्यपाल महोदय, विभिन्न विभागों के अध्यक्ष तथा राजस्व परिषद् ने जारी किया

कार्यालय राज्य कर आयुक्त, उत्तराखण्ड

(विधि-अनुभाग)

22 सितम्बर, 2020 ई0

ज्वाइण्ट कमिश्नर (कार्य0), राज्य कर, देहरादून/हरिद्वार/रुद्रपुर/हल्द्वानी सम्भाग।

पत्रांक 2200/रा0कर आयु0 उत्तरा0/विधि—अनुमाग/Noti.Vol.I/2020—21/देहरादून—उत्तराखण्ड शासन वित्त अनुमाग 8 द्वारा जारी अधिसूचना संख्याएं 688/2020/6(120)/XXVII(8)/2020/CT-60; 689/2020/6(120)/XXVII(8)/2020/CT-61; 690/2020/5(120)/XXVII(8)/2020/CTR-62; समदिनांकित 16 सितम्बर, 2020 का संदर्भ ग्रहण करें, जिनके द्वारा क्रमशः उत्तराखण्ड माल और सेवा कर (नौवां संशोधन) नियम, 2020; शासन की अधिसूचना संख्या 330/2020 दिनांक 20 मई, 2020 में अग्रेतर संशोधन तथा उत्तराखण्ड माल और सेवा कर (दसवां संशोधन) नियम, 2020 अधिसूचित किया गया है।

उपरोक्त अधिसूचनाओं की प्रति आपको इस आशय से प्रेषित है कि उक्त की अतिरिक्त प्रतियां कराकर अपने अधीनस्थ समस्त कर-निर्धारण अधिकारियों को आवश्यक कार्यवाही करने हेतु तथा बार एसोसिएशन के पदाधिकारियों / व्यापारी संगठनों के अध्यक्ष / सचिव को सूचनार्थ उपलब्ध कराने का कष्ट करें।

वित्त अनुभाग-8 अधिसूचना

16 सितम्बर, 2020 ई0[°]

संख्या 688 / 2020 / 6(120) / XXVII(8) / 2020 / CT-60—राज्यपाल, उत्तराखण्ड माल और सेवा कर अधिनियम, 2017 (अधिनियम संख्या 06, वर्ष 2017) की धारा 164 द्वारा प्रदत्त शक्तियों का प्रयोग करते हुए, परिषद् की सिफारिशों पर, उत्तराखण्ड माल और सेवा कर नियम, 2017 को अग्रेत्तर संशोधन करने हेतु निम्नलिखित नियम बनाते हैं, अर्थात् :—

उत्तराखण्ड माल और सेवा कर (नवां संशोधन) नियम, 2020

संक्षिप्त नाम एवं प्रारम्भ

- 1. (1) इन नियमों का संक्षिप्त नाम उत्तराखण्ड माल और सेवा कर (नवां संशोधम) नियम, 2020 है।
 - (2) ये दिनांक 30 जुलाई, 2020 से प्रवृत्त होंगे।

प्रारूप जीएसटी 2. उत्तराखण्ड माल और सेवाकर नियम, 2017 में प्रारूप जीएसटी आईएनवी-01 के आईएनवी-01 स्थान पर निम्नलिखित प्रारूप रखा जाएगा, अर्थात् :- का संशोधन

"प्रारूप जीएसटी आईएनवी -01 (नियम 48 देखिये)

Format/Schema for e-Invoice

Note 1: Cardinality means whether reporting of the item(s) is mandatory or optional as explained below:

0..1: It means that reporting of item is optional and when reported, the same cannot be repeated.

1..1: It means that reporting of item is mandatory but cannot be repeated.

1..n: It means that reporting of item is mandatory and can be repeated more than once.

0..n: It means that reporting of item is optional but can be repeated more than once if reported. For example, previous invoice reference is optional but if required one can mention many previous invoice references.

Note 2: Field specification Number (Max length: m, n) indicates 'm' places before decimal point and 'n' places after decimal point. For example, Number (Max length: 3,3) will have the format 999.999

| | A Section | | | Schem | ia (Version 1.1) | | |
|-----------|-----------------------------------|--|--------------------------------------|---------------------------------------|----------------------------------|--|--|
| Sr No. | Technical name of the field | Cardi nality (0.1/ 1.1/ 0.n/ L.n) | Brief Description of the field | Whether Mandato ey/ Optional | Pacifical Pielo Specification | Sumple Yalve of the field | Explanatory Notes |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1. | Basic Details | 11 | | Mandato ry | | | Header for Basic Details |
| 1.0 | Version | 11 | Version Number | Mandator y | String (Max. Length:6) | 1.1 | This is version of the e-invoice schema. It will be used to keep track of version of invoice specification. |
| | IRA | i . l | Invoice Reference Number | Mandator y | String (Length:64) | a5c12dca80 e7433217 ba4013750 f2046f229 | This will be a unique reference number for the invoice However, the supplier will not be populating this field. |
| | | | | | | | The registration request may not have this field populated |

|] | 1 | 1 | 1 | | | · · · · · · · · · · · · · · · · · · · | |
|------|--|-----|--|---------------|---------------------------|--|---|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| | | | | | | , | The Invoice Registration Portal (IRP) will generate this IRN and respond to the registration request. e-invoice is valid only when it |
| | 1. | | | | | | has the IRN. Hence, this is marked as mandatory field. |
| 1.2 | Supply_Typ e_Code | l F | Code for Supply Type | Mandator y | Enumerated List | B2B/B2C/S EZWP/SEZ WOP/EXP WP/EXPW OP/DEXP | This will be the code to identify type of supply. B2B: Business to Business B2C: Business to Consumer |
| | | | | • | | | SEZWP: To SEZ with Payment SEZWOP: To SEZ without Payment |
| | | | | | | | EXPWP: Export with Payment EXPWOP: Export without Payment |
| | | | | | | | DEXP: Deemed Export |
| 1,3 | Document_T ype_Code | 11 | Code for Document | Mandator y | Enumerated List | INV / CRN / DBN | Type of Document: INV for Invoice, |
| | | | Туре | | | | CRN for Credit Note, |
| | · | | | | | | DBN for Debit note. |
| √1.4 | Document_ Num | 11 | Document Number | Mandator y | String (Max Length:16) | Sa/1/2019 | This is as per relevant rule in CGST/SGST/UTGST Rules. |
| 1.5 | Document_ Date | 11 | DocumentDate | Mandator | String (DD/MM/YYYY) | 21/07/2019 | The date on which the Invoice was issued. Format "DD/MM/YYYY" |
| 1.6 | Additional_ Currency_C ode | 10 | Additional Currency Code | Optional | Enumerated List | USD, EUR | The field is for reporting additional currency, if any, in which all invoice amounts can be given, along with INR. One such additional currency |
| | | , | | | | | may be used in the invoice, as per list published under ISO 4217 standard. |
| | | | | | | | List published and updated from time to time at https://www.icegate.gov.in/Webappl/CUR_ENQ |
| 1.7 | Reverse_Cha rge | 01 | Reverse Charge | Optional | String (Length: 1) | Y | Whether the tax liability payable is under Reverse Charge. |
| 1.8 | IGST_Appli cability_desp ite_Supplier _and_Recipi ent_located_ in_same_ State/UT | 01 | IGST Applicability despite Supplier and Recipient located in same State/UT | Optional | String (Length: 1) | N | To report the scenarios where the supply is chargeable to IGST despite the fact that the Supplier and Recipient are, located within same State/UT |

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|-------|-------------------------------------|-------|----------------------------------|---------------|------------------------|-------------------|---|
| Ž., | Document_ Period | 01 | | Optional | | | Header for Document Period |
| 2.1 | Document_P eriod_Start _Date | 1 | Document Period Start Date | Mandator y | String (DD/MM/YYYY) | 21/07/2019 | This is the start date of the document period (delivery/invoice period). (This field is mandatory only if |
| | | | | | | | this section is selected) |
| 2.2 | Document_P eriod_End_ Date | 1.,1 | Document Period End Date | Mandator y | String (DD/MM/YYYY) | 21/07/2019 | This is the end date of the document period (delivery/invoice period). (This field is mandatory only if |
| 3 | Preceding Document & Contract | 0.1 | | Optional | | | this section is selected) Header for Preceding Documents Contracts Reference |
| | Reference. | | | | | | |
| 3.1 | Precedings Document Reference | | | Optional | | | Sub-header for Preceding Document Reference |
| 3.1.1 | Preceding_D ocument_ Number | 11 | Preceding Document Number | Mandator y | String (Max length:16) | Sa/1/2019 | This is the reference of original document/invoice to be provided optionally in the case of debit or credit notes. |
| • | , | | | | | | Credit/Debit notes, against invoices can also be referred here. (This field is mandatory only if |
| | | | | | | 01/07/00 | this section is selected) Date of preceding |
| 3.1.2 | Preceding_D ocument_ Date | lul - | Date of Preceding Document | Mandatory | String (DD/MM/YYYY) | 21/07/20 19 | document/invoice. (This field is mandatory only ly this section is selected) |
| 3,1.3 | Other Reference | 01 | Other Reference | Optional | String (Maxlength:20) | KOL01 | This field is to provide any additional reference e.g. specific branch, their user ID, their employee ID, sales centre reference etc. |
| 3.2 | Receipt / Contract References | 0 n | | Optional | | | Sub-header for Receipt/ Contract References |
| 3.2.1 | Receipt_Advi ce_Reference | | Receipt Advice Reference | Optional | String (Max length:20) | CREDIT30 | This reference is kept for user to provide number of their receipt advice to their customer, in lieu of advance. |
| 3.2.2 | Receipt_Advi | 01 | Date of Receipt Advice | Optional | String (DD/MM/YYYY) | 21/07/2019 | Date of issue of receipt advice for advance. |
| 3.2.3 | Tender_or_L ot_Reference | 01 | Tender or Lot Reference | Optional | String (Max length:20) | TENDERJA N2020 | This reference is kept for mentioning number or details of Lot or Tender, if supplies are made under such Lot or tender. |
| 3 2.4 | Contract_Ref erence | 01 | Contract Reference | Optional | String (Max length:20) | CONT23072 019 | This reference is kept for mentioning contract number, if supplies are made under any specific Contract |
| 3.2.5 | External_Ref erence | 01 | External Reference | Optional | String (Maxlength:20) | EXT23222 | An additional field for provision of any additional/external reference number for the supply. |

| 1 | 2 | 3 | . 4 | 5 | 6 | 7 | 8 |
|-------|--------------------------|------|---------------------------|----------------|-----------------------------|--|--|
| 326 | Project_Refe rence | 01 | Project Reference | Optional | String (Max length:20) | PJICODE0 | This reference is kept for mentioning project number, supplies are made under an specific project |
| 3.2.7 | PO _Ref_Num | 01 | PO Reference Number | Optional | String (Max length:16) | Vendor PO | This is the reference number of Purchase Order |
| 3.2.8 | PO_Ref_Dat | 01 | PO Reference Date | Optional | String (DD/MM/YYYY) | 21/07/2019 | This is the date of Purchase Order. |
| 4, | Supplier Information | 1.1 | | Mandato ry | | | Header for Supplie Information |
| 4.1 | Supplier_Le gai_Name | 11 | Supplier Legal Name | Mandator y | String (Max. length:100) | XYZ Ltd. | Legal Name, as appearing in PAN of the Supplier |
| 4.2 | Supplier_Tra de_ Name | 01 | Trade Name of Supplier | Optional | String (Max length: 100) | ABC Traders | A name by which the Supplier is known, i.e. Business Name, other than legal name |
| 4.3 | Supplier_ GSTIN | 11 | GSTIN of Supplier | Mandator y | String (Length: 15) | 29AADFV7 589CIZX | GSTIN of the Supplier |
| 4.4 | Supplier_A ddress1 | 11 | Supplier Address 1 | Mandator y | String (Max length: 100) | # 1-23-120, Flat No. 3, Nalanda Apartments, MG Road, Vasanth Nagar | Address I of the Supplier (Building/Flat no., Road/Street, Locality etc.) |
| 4.5 | Supplier_A ddress2 | 01 | Supplier Address 2 | Optional | String (Max length: 100) | # 1-23-120, Flat No. 3, Nalanda Apartments, MG Road, Vasanth Nagar | Address 2 of the Supplier (Building/Flat no., Road/Street, Locality etc.), if any |
| 4.6 | Supplier_Pla ce | 12.1 | Supplier Place | Mandator y | String (Max length:50) | Bangalore . | Location of the Supplier (City/Town/Village) |
| 4.7 | Supplier_Sta te_Code | 11 | Supplier State Code | Mandator y | Enumerated List | 29 | State Code of the Supplier as per GST System List published and updated from time to time at https://www.icegate.gov.in/Webapol/STATE_ENO |
| 4.8 | Supplier_Pin code | 11 | Supplier PIN Code | Mandator y | Number (Length: 6) | 560087 | PIN Code of the Supplier Locality |
| 4.9 | Supplier_P hone | 01 | Supplier Phone | Optional | String (Max length:12) | 9999999999 | Contact number of the Supplier |
| 4.10 | Supplier_Em | 01 | Supplier e-mail | Optional | String (Max length:100) | supplier@a bc.com | e-mail ID of the Supplier,as per REGEX (Regular Expressions) pattern |
| 5. | Recipiènt Information | 11 | | Mandato. ry | | | Header for Recipient Information |
| 5.1 | Recipient_L' egal_Name | 11 | Recipient Legal Name | Mandator y | String (Max. length: 100) | PQR Pvt. Ltd. | It will be legal name of recipient, as per PAN. |

| 1 | | | | | | | |
|-------|------------------------------------|------|---------------------------------|---------------|-----------------------------|--|---|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 5 2 | Recipient_Tr ade_Name | 01 | Recipient Frade Name | Optional | String (Max length: 100) | Adarsha | It will be trade name of recipient, if available. |
| 5.3 | Recipient_G STIN | 1.11 | GSTIN of Recipient | Mandator y | String (Length. 15) | 29ABCCRI 832CIZX, URP | GSTIN of the Recipient, if available. |
| | | 1 | | | | | URP: In case of exports or if supplies are made to unregistered persons |
| 5.4 | Place_Of_Su pply_State_ Code | 1.1 | Place of Supply (State Code) | Mandator y | Enumerated List | 29, 96 | Code/State Code of Place of Supply as per GST System. |
| | | | | | - | | List published and updated from time to time at https://www.icegate.gov.in/Webappl/STATE_ENO |
| . 5.5 | Recipient_A ddress) | 11 | Recipient Address 1 | Mandator y | String (Max length: 100) | # 1-23-120, Flat No. 3. Nalanda Apartments, MG Road, Vasanth Nagar | Address I of the Recipient (Building/Flat no., Road/Street, Locality etc.) |
| 5.6 | Recipient_A ddress2 | 01 | Recipient Address 2 | Optional | String (Max length: 100) | # 1-23-120, Flat No. 3, Nalanda Apartments, MG Road, Vasanth Nagar | Address 2, if any, of the Recipient (Building/Flat no., Road/Street, Locality etc.), if any |
| 5.7 | Recipient_P | 11 | Recipient Place | Mandator y | String (Max length: 100) | Mysore | Location of the Recipient (City/Town/Village) |
| 5.8 | Recipient_St ate_Code | 1.,1 | Recipient State Code | Mandator y | Enumerated List | 29 | Code/State Code of the Recipient. |
| | | | | | • | | List published and updated from time to time at https://www.icegate.gov.in/We bapp/STATE_ENO |
| 5.9 | Recipient_ Pincode | 01 | Recipient PIN Code | Optional | Number (Length: 6) | 560002 | PIN code of the Recipient locality. |
| | | | | | | | In case of export, Pincode need not be mentioned. |
| 5.10 | Country_Co de_of_Expor t | 01 | Country Code of Export | Optional | Enumerated List | AN | Code of country of export as per ISO 3166-1 alpha-2 / Indian Customs EDI system. |
| | | | | | | | List published and updated from time to time at - https://www.icegate.gov.in/Webappl/COUNTRY_ENQ |
| 511 | Rec'pient_P hone | 01 | Recipient Phone | Optional | String (Maxlength:12) | 0802223323 | Contact number of the Recipient |
| | Rec pient_e mail_ID | 01 | Recipient e-mail ID | Optional | String (Max length: 100) | billing@xyz .com | e-mail ID of the Recipient, as per REGEX (Regular Expressions) pattern |

| | | | ,, | , | | † | 1 |
|----------|-----------------------------------|-----|---------------------------------|----------------|-----------------------------|--|---|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 6. | Payee | 1 . | | Optional | | | Header for Paye Information |
| 6.1 | Payue_Name | 0 1 | Payee Name | Optional | String (Maxlength:100) | Ramesh K | Name of the person to whom payment is to be made |
| 6.2 | Payce_Bank _Account_N umber | 01 | Payee Bank Account Number | Optional | String (Max length: 18) | 3868501747 262 | Bank Account Number of Payee |
| 6.3 | Mode_of_Pa yment | 01 | Mode of Payment | Optional | String (Max length: 18) | Direct Transfer | Mode of Payment:Cash/Credit/Direct Transfer etc. |
| 6.4 | Bank _Branch_Co de | 01 | Bank Branch Code, | Optional · | String (Max length: 11) | SBIN98765 43 | Indian Pinancial System Code (IFSC) of Payee's Bank Branch |
| 6.5 | Payment_Te rms | 01 | Payment Terms | Optional | String (Max length: 100) | Text | Terms of Payment, if any, with the Recipient can be provided. |
| 6.6 | Payment_Ins truction | 01 | Payment Instruction | Optional | String (Max length:100) | Text | Instruction, if any, regarding payment can be provided |
| -6.7 | Credit_Trans fer_Terms | 01 | Credit Transfer Terms | Optional | String (Max length: 100) | Text | Terms to specify credit transfer payments. |
| 6.8 | Direct_Debit _Terms | 01 | Direct Debit Terms | Optional | String (Ma x length:100) | Text | Terms, if any, to specify a direct debit. |
| 6.9 | Credit_Days | 01 | Credit Days | Optional | Numeric (Max length:4) | 30 | Number of days within which payment is due. |
| 3 | Delivery In formation | 0.1 | | Optional | | | Header for Delivery Information |
| 7.1 | Ship_To_De talls | 01 | Ship To Details | Optional | Refer A 1. | 2 | Details of location to which the supply has to be delivered. |
| 7.2 | Dispatch_Fr om_Details | 07 | Dispatch From Details | Optional | Refer A 1. | <u>.</u> | Details of location from where Supply has to be dispatched. |
| 8 | Invoice Item Details | | | Man. datory | | | Hender for Invoice Itagi Defails |
| 8.7 | Item_List | 1n | Item List | Mandato ry | Refer A 1.2 | | Provides information about the goods and services being invoiced. |
| 9. | Document Total | 11 | | Man datory | | | Header for Document Total Details |
| 9.1 | Document_ Total_Detail | 11 | Document Total Details | Mandator y | Refer A 1.3 | | Details of document total including taxes. |
| 10- | Extra Information | 0.1 | | Option al | | | Header for Extra Information |

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|-------------|--|------|---|---------------|--------------------------------|----------------------------------|---|
| 10.1 | Tax_Scheme | 1 | Tax Scheme | Mandator y | String (Max length, 10) | GST | To specify the tax/levy applicable – GST (This field is mandatory only if this section is selected) |
| 10.2 | Remarks | 01 | Remarks | Optional | String (Max length: 100) | New batch Items submitted | A textual note that gives unstructured information that is relevant to the Invoice as a whole e.g. reasons for any correction or assignment note in case the invoice has been factored etc. |
| 10.3 | Port_Code | 01 | Port Code | Optional | Enumerated List | Alpha numeric | In case of export/supply to SEZ, port code can be mentioned as per Indian Customs EDI System (ICES), if applicable and available at the time of reporting e-invoice. |
| | | | | | | | Lists published and updated from time to time at below URLs: |
| \ \ \ | | | | , | | | EDI Port Codes: https://www.icegate.gov.in/Webappi/LOCATION_ENO |
| | | | | | | · | Non-EDI Port Codes: https://www.icegate.gov.in/Webappi/nonlocation_det_all.isp |
| 10.4 | Shipping_Bi II_Number | 01 | Shipping Bill* Number | Optional | String (Max length: 20) | Alpha numeric | In case of export/supply to SEZ, shipping bill number as per Indian Customs EDI System (ICES), can be mentioned, if applicable and available at the time of reporting e-invoice. |
| 10.5 | Shipping_Bi N_Date | 01 | Shipping Bill Date | Optional | String(DD/M M/YYYY) | 03/12/2020 | Date of Shipping Bill as per Indian Customs EDI System (ICES) |
| 10.6 | Export_Duty _Amount | 01 | Export Duty Amount | Optional | Number (Max Length: 12,2) | 1200000.50 | Amount of Export Duty in INR, if any, applicable (in case of invoices for export) |
| 10.7 | Supplier_Ca n_Opt_Refu nd | 01 | Supplier Can Opt Refund | Optional | String (Length: 1) | Y/N | in case of deemed export supplies, this field is for mentioning whether supplier can exercise the option of claiming refund or not. |
| 10.8 | ECOM_GST IN | 01 | e-Commerce · Operator's GSTIN | Optional | String (Length: 15) | 29ABCCR183 2C1CX | GSTIN of e-commerce operator, if supply is made through him/her. |
| 11. | Additional: Supporting Documents | 0. n | | Optional | | | Header for Additional Supporting Documents |
| 11.1 | Additional_ Supporting_ Documents_ URL | 01 | Additional Supporting Documents URL | Optional | String (Max length: 100) | http://www.xy z.com/abc | This is to enter URL reference of additional supporting documents, if any. |
| 11.2 | Additional_ Supporting _Documents _base64 | 01 | AdditionalSupp orting Document in base64 | Optional | String (Max length: 1000) | Base 64 encoded . Document | This is to add any additional document in PDF/Microsoft Word in Base64 encoded format. |

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| 113 | Additional_I nformation | 01 | Additional Information | Optional | String (Max length: 1000) | Freetext. remarks, identifiers, etc. | Recipient transaction e.g. CIN. trade-specific information. Drug Licence Reg. No., FOB/CIF etc. |
| 12. | E-way Bill Details | 0.1 | | Optional | | | Header for e-way Bill Details |
| 12.1 | Transporter_I D | 01 | Transporter ID | Option al | String (Length: 15) | 29AADFV758 9C1ZO | Registration / Enrolment Number of the transporter (This field is required if Part-A of E-waybill has to be |
| 12.2 | Trans_Mode | 01 | Mode of Transportation | Optional | Enumerated List | 1/2/3/4 | generated) Option to be provided based on mode of transport available on e-Way Bill Portal I for Road; 2 for Rail; |
| | | | | | | • | 3 for Air; 4 for Ship (This field is required if Part-B of e-way bill is also to be generated) |
| 12.3 | Trans_Distan | 11 | Distance of Transportation | Mandator y | Number (Max length: 4) | 200 | Distance of Transportation (This field is mandatory only if this section is selected) |
| 12.4 | Transporter_ Name | 10 | Transporter Name | Optional | String (Max length: 100) | Sphurthi Transporters | Name of the Transporter |
| 12.5 | Trans_Doc_ No. | 01 | Transport Document Number | Optional | String (Max length: 15) | As/34/746 | Transport Document Number (This field is mandatory if mode of Transport is Rail or Air or Ship) |
| 12.6 | Trans_Doc_ Date | 01 | Transport Document Date | Optional | String(DD/MM/YY YY) | 21/07/2019 | Date of Transport document. (This field is mandatory if mode of Transport is Rail or Air or Ship) |
| 12.7 | Vehicle_No. | 03 | Vehicle Number | Optional | String (Max. length: 20) | KA12KA1234 or KA12K1234 or KA123456 or KAR1234 | Vehicle Registration Number (This field is mandatory if mode of Transport is Road) |
| 12.8 | Vehicle_Typ e | 01 | Vehicle Type | Optional | Enumeration List . | O/R | To mention nature of vehicle: O: Over-Dimensional Cargo R: Regular (This field is mandatory if Part-B of e-way bill is also to be generated) |
| A 1.0 | Ship To Details | .017 | | Optional | | | Header for Annexure A 1.0:Ship To Details |

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|-------------|-----------------------------|-----------------|-----------------------|---|-----------------------------|---|--|
| Sr. No. | Parameter Name | Cardi nality | Description | Whether optional or mandato | Field Specifications | Sample Value | · Explanatory Notes |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| A. 1.0. | ShipTo_Lega I_Name | 11 | Ship To Legal Name | Mandator y | String (Max length: 100) | ABC-1 Ltd. | Legal Name of the entity to whom the supplies are shipped to. (This field is maridatory only if this section is selected) |
| A.1.0. 2 | ShipTo_Trad e_Name | 01 | Ship To Trade Name | Optional | String (Max length: 100) | XYZ-1 . | Trade Name of the entity to whom the supplies are shipped to. |
| A.1.0. 3 | ShipTo_GST IN | 01 | Ship To GSTIN | Optional . | String (Length: 15) | 36AABCT222 3L1ZF | GSTIN of the entity to whom the supplies are shipped to. |
| A.1.0. 4 | ShipTo_Addr essi | 11 | Ship To · AddressI | Mandator y | String (Max length: 100) | Flat No. 2, Priya Towers, Omega Road, Srinivasa Nagar | Address I of the entity to whom the supplies are shipped to (This field is mandatory only if this section is selected) |
| A.1.0. 5 | ShipTo_Addr ess2 | 01 | Ship To Address2 | Optional | String (Max length: 100) | Flat No. 2, Priya Towers, Omega Road, Srinivasa Nagar | Address 2, if any, of the entity to whom the supplies are shipped to |
| A.1.0. 6 | ShipTo_Plac e | 1,.1 | Ship To Place | Mandalor y | String (Max length: 100) | Bangalore , | Place (City/Town/Village) of entity to whom the supplies are shipped to. (This field is mandatory only if this section is selected) |
| A.i.0. 7 | ShipTo_Pinc ode | 11 | Ship To Pincode | Mandator y | Number(Max length: 6) | 560001 | PIN code of the location to which the supplies are shipped to. (This field is mandatory only if this section is selected) |
| A.1.0. 8 | Ship_To_State e_Code | 11 | Ship To State Code | Mandator y | Enumerated List | 29 | Code/State Code (as per GST System) to which the supplies are shipped to. List published and updated from 'time to time at https://www.icegate.gov.in/Webappi/STATE_ENO (This field is mandatory only if this section is selected) |
| A 1.1 | Dispatch From Details | 01 | | Optional | | | Header for Annexure A 1.1: Dispatch From Details |
| Şr. No. | Parameter Name | Cardi nality | Description | Whether måndato ry or optional | Field Specific | Sample Value | Explanatory Notes |
| A.1.1. | DispatchFro m_Name | 11 | Dispatch From Name | Mandator | String (Max length:100) | XYZ-2 | Name of the entity from which goods are dispatched. (This field is mandatory only if this section is selected) |

| | · ''J | | | 0, 01 14 | 71, 2020 40 (47) | 1117 10, 1542 | , (14) (14(I) 45 |
|--------------|---------------------------------|-----------------|-----------------------------|---|-------------------------------|--|---|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| A 1.1 2 | DispatchFrom_Address | | Dispatch From Address1 | Mandato y | r String (Max length: 100) | Building No. 4/2, Flat No. 3, Kakatiya Apartments, Vasanth Naga | Address 1 of the entity from which goods are dispatched (This field is mandatory only if this section is selected) |
| AII | m_Address. | | Dispatch From Address2 | Optional | String (Max length: 100) | Building No. 4/2. Flat No. 3. Kakatiya Apartments, Vasanth Nagar | Address 2 of the entity from which goods are dispatched. |
| A.1.1. | DispatchFrom_Place | 11 | Dispatch From Place | Mandator y | String (Max length: 100) | Bangalore | Place (City/Town/Village) of the entity from which goods are dispatched. (This field is mandatory only if this section is selected) |
| A.1.1. | DispatchFro m_State_Co de | | Dispatch From State Code | Mandator y | Enumerated List | 29 | Code/State Code of the entity (as per GST System), from which goods are dispatched. List published and updated from time to time at https://www.icegate.gov.in/Webappl/STATE_ENO (This field is mandatory only if this section is selected) |
| A.1.1. 6 | DispatchFro m_Pincode | 1 | Dispatch From Pincode | Mandator y | Number(Length: 6) | 560087 | Pincode of the locality of entity from where goods are dispatched. (This field is mandatory only if this section is selected) |
| A 12 | Item Details | Junt . | | Mandato ry | | | Header for Annexure A 1.2 (Item Détails |
| 5. 2. | Parameter Name | Cardi nality | Description | Whether mandato ry or optional | Pield Specifications | Sample Value | Explahatory Notes |
| A.1.2. | SI_No. | 11 | Serial Number | Mandator y | String (Max length: 6) | 1,2,3 | Serial number of the item |
| A.1.2. 2 | Item_Descri ption | 01 | Item Description | Optional | String (Max length: 300) | Mobile | Description of the item |
| A.1.2. 3 | ls_Service | | Service * | Mandator y | String (Length: 1) | Y/N | Specify whether supply is service or not. |
| A.1.2. | HSN_Code | 11 | HSN Code | Mandator y | String (Max length: 8) | 1122 | To enter applicable HSN / SAC Code of Goods / Service |
| A.1.2. 5 | Baich Details | 01 | | Optional | Refer A 1.4 | | Some manufacturers may mention batch details (in Section A 1.4) |
| A.1.2. 6 | Barcode | 01 | Barcode | Optional | String (Max length: 30) | b123 | Barcode, if any, of the item. |
| A.1.2. | Quantity | 1.0 | Quantity | Optional | Number (Max length: 10,3) | 10 | The quantity of items to be mentioned in the invoice. This is mandatory only in case |
| A.1.2. | Free_Qty | 01 | Free Quantity | | Number (Max length: 10,3) | 99 | Of goods. Quantity of item(s), if any, given free of charge (FOC) |

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|--------------|--------------------------|----|-------------------------|---------------|-------------------------------|--------|--|
| A 1.2. | Unit_Of_Me asurement | 01 | Unit of Measurement | Optional | String (Max length: 8) | Box | The Unit of Measurement (UOM), if any applicable on invoiced goods. |
| A.1.2 10 | Item_Price | 11 | Item Price | Mandator y | Number (Max length 12.3) | 500.5 | Price per unit item. |
| A.1.2. | Gross_Amou | 1 | Gross Amount | Mandator y | Number (Max length : 12.2) | 5000 | The gross price of an item (cost multiplied by quantity - rounded off to 2 decimal), exclusive of taxes. |
| A.12. 12 | Item_Discou nt_Amount | 01 | Item Discount Amount | Optional | Number (Max length: 12,2) | 10.25 | Discount amount, if any, for the item. |
| A.1.2. 13 | Pre_Tax_Val ue | 01 | Pre-Tax Value | Optional | Number (Max length: 12,2) | 99.00 | If pre-tax value is different from taxable value, mention the pre-tax value and taxable values separately. In some cases, the pre-tax value |
| | | • | | | | | may be different from taxable value. For example, where old goods are exchanged for new ones (e.g. new phone supplied for INR 20,000 along with exchange of old phone, then pre-tax value would be INR 20,000 and taxable value would be INR 24,000, assuming exchange value of old phone is 4,000. |
| | | | | | , | | Another example is in the case of real estate where pre-tax value may be different from taxable value. |
| A.1.2. 14 | Item_Taxabl e_Value | Įl | Item Taxable Value | Mandator y | Number (Max length: 12,2) | 5000 | . This is the value on which tax is computed. Value cannot be negative. |
| A.1.2. 15 | GST_Rate | 11 | GST Rate | Mandator y | Number (Max length; 3,3). | 5 | The GST rate, represented as percentage that applies to the invoiced item. It will be IGST rate or sum of CGST & SGST Rates. |
| A.1.2. 16 | IOST_Amt | 01 | IGST Amount | Optional | Number (Max Length: 12,2) | 999.45 | Amount of IGST payable per- item(rounded off to 2 decimals). If IGST is reported, then CGST & SGST/UTGST will be blank. For taxable supplies, either IGST or CGST &SGST/UTGST should be reported. |
| A.1.2. 17 | CGST_Amt | 01 | CGST Amount | Optional | Number (Max Length: 12.2) | 650.00 | Amount of CGST payable per item(rounded off to 2 decimals). If CGST, is reported, then SGST/UTGST has to be reported and IGST will be blank. |
| A.1.2. 18 | SGST_UTG ST Amt | 01 | SGST/UTGST Amount | Optional | Number (Max length: 12,2) | 650.00 | Amount of SGST/UTGST payable per item(rounded off to 2 decimals). |

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| | | | | | | | If SGST/UTGST is reported, then CGST must be reported and IGST will be blank. |
| A1.2. 19 | Comp_Cess_ Rate_Ad_val orem | 01 | Compensation Cess Rate, Ad_Valorem | Optional | Number (Max length:3,3) | 2.5% | Ad valoremRate of GST Compensation Cess, applicable, if any |
| A1.2. 20 | Comp_Cess_ Amt_ Ad_Valorem | 01 | Compensation Cess Amount, Ad Valorem | Optional | Number (Max length: 12,2) | 56.00 | GST Compensation Cess amount, ad valorem (rounded off to 2 decimals) (based on value of the item) |
| A1.2. 21 | Comp_Cess_ Amt_Non_A d_Valorem | 01 | Compensation Cess Amount, Non ad valorem | Optional | Number (Max length:12,2) | 23.00 | GST Compensation Cess amount, computed on the basis other than value of item (i.e. specific cess amount computed based on quantity, number etc.) |
| A1,2. 22 | State_Cess_ Rate_ad_val orem | 01 | State Cess Rate, Ad Valorem | Optional . | Number (Max length: 3,3) | 1.5 % | Ad valorem Rate of State/UT Cess, applicable, if any |
| A1.2. 23 | State_Cess_ Amt_Ad_Va lorem | 01 | State Cess Amount, ad valorem | Optional | Number (Max length: 12,2) | 43.00 | State/UT Cess amount, ad valorem (based on value of the item) |
| A1.2. 24 | State_Cess_ Amt_Non_A d_Valorem | 0 l | State Cess Amount, nonad valorem | Optional | Number (Max length: 12,2) | 12.00 | State/UT Cess amount, computed on the basis other than value of item (i.e. specific cess amount computed based on quantity, number etc.) |
| A.1.2. 25 | Other_Charg es_item_Lev ei | 01 | Other Charges (item level) | Optional | Number (Max length: 12,2) | 874.95 | Any other charges applicable at item level. These may not be part of taxable value, e.g. in case of pure agent reimbursement. |
| A.1.2. 26 | Purchase_Or der_Line_Re ference | 01 | Purchase Order Line Reference | Optional | String (Max length: 50) | 746/ABC/01 | Reference of Purchase Order |
| A.1.2. 27 | Item_Total Amt | 11 | Item Total Amount | Mandator y | Number (Max length: 12,2) | 5000 | The item total value that includes all taxes, cesses, as well as other charges. However, this value excludes discount if any. |
| A.1.2. 28 | Origin_Coun try_Code | 01 | Code of Country of Origin | Optional | Enumerated List | DZ. | This is to specify country of origin of the item, e.g. mobile phone sold win India could be manufactured in other country; Code of country of export as per ISO 3166-1 alpha-2 / Indian Customs EDI system (ICES). List published and updated from time to time at |
| A.1.2. | Unique_Seri | 01 | Unique Serial | Optional | String . | 553 | https://www.icegate.gov.in/Webappi/COUNTRY_ENO |
| 29 | al_Number | | Number | - | (Max length: 20) | - | item having a unique number. |
| A.1.2. 30 | Product_Att ribute_Detai ls | 0n | Optional | R | efer A.1.5 | | Attribute details of product |

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| A 1.3 | Document Total Details | 11 | | Manda tory | | | Header for Annexure A 1.3:Document Total Details |
| Sr: No. | Parameter Name | Cardi nality | Description | Whethe | | Sample Value | Explanatory Notes |
| , | | 1 | | mandat ory or- optiona | | | |
| A.1.3. | Taxable_Value_Total | | Total Taxable Value | Mandat ory | Number (Max length: 14,2) | 768439.35 | This is the sum of the taxable values of all the items in the document. |
| A.1.3. 2 | IGST_Amt_ Total | 01 | Total IGST Amount | Optiona I | Number (Max length: 14,2) | 265.50 | Total IGST amount for the invoice. Appropriate taxes based on rule will be applicable. For example, either of CGST & SGST/UTGST or IGST will be |
| , | | | | | · | | mandatory. As this is conditional mandatory, it is marked as 'optional' |
| A.1.3. 3 | CGST_Am_ Total | 10 | Total CGST Amount | Option al | Number (Max length: 14,2) | 65.45 | Total CGST amount for the invoice. |
| | | | | | | | Appropriate taxes based on rule will be applicable. |
| | | | | | | | For example, either of CGST & SGST/UTGST or IGST will be mandatory. As this is conditional mandatory, it is marked as 'optional' |
| A.1.3. | SGST_UTG ST-Amt_To tal | 01 | Total SGST/UTGST Amount | Option al | Number (Max length: 14,2) | 65.45 | Total SGST/UTGST amount for the invoice. Appropriate taxes based on rule will be applicable. For example, either of CGST & SGST/UTGST or IGST will be mandatory. As it is conditional mandatory. it is marked as 'optional' |
| A.1.3. 5 | Comp_Cess _Amt_Total | 01 | Total Compensation Cess Amount | Option al | Number (Max length: 14,2) | 24.95 | Total GST Compensation Cess amount for the invoice (ad valorem as well as non-ad valorem) |
| A.1.3. 6 | State_Cess_ Amt_Total | 01 | Total State Cess Amount | Option al | Number (Max length: 14,2) | 5.45 | Total State cess amount for the invoice (ad valorem as well as non-ad valorem) |
| A.1 3.7 | Discount_A mt_Invoice_ Level | 01 | Invoice Level Discount Amount | Option al | Number (Max length: 14,2) | 100.00 | This is Discount Amount. if any, applicable on total invoice value |
| A.1 3.8 | Other_Charg es_Invoice_ Level | 01 | Other Charges (Invoice Level) | Option al | Number(Max length: 14.2) | 200.00 | This is Other charges, if any, applicable on total invoice value |
| L | | L. | | | | | |

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| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| A.1.3 9 | Round_Off_ Amount | 01 | Round Off Amount | Option al | Number (Max length: 2.2) | 31.21 | This is round off amount of total invoice value |
| A.1.3 .10 | Total_Invoic e_Value_IN R | 11 | Total Invoice Value in INR | Mandat | Number (Max length: 14,2) | 745249678.50 | The total value of invoice including taxes/GST and rounded to two decimals maximum. |
| A.1.3 .11 | Total_Invoic e_Value_FC NR | 01 | Total Invoice Value in FCNR | Option al | Number (Max length: 14,2) | \$5729.65 | The total value of invoice in Additional Currency |
| A.1.3. 12 | Paid_Amoun t | 01 | Paid Amount | Optiona J | Number (Max length: 14,2) | 8463.50 | The amount, if any, which has been paid in advance. It must be rounded to maximum |
| A.1.3. 13 | Amount_Du | 01 | Amount Due | Optiona I | Number (Max length:14.2) | 98789.50 | .2 decimals. The outstanding amount due for payment. It must be rounded to maximum 2 decimals. |
| A1.4 | Batch Details | 70.1 | | Option al | | | Header for Annexure A 1.4:Batch Details |
| 3.2 | Parametec Name | Card naine | Description | Wheth er manda- tury-or option al | Field Specific ations | Sample Value | Explanatery Notes |
| A.1.4. | Batch_Num ber | 11 | Batch Number | Mandat ory | String (Max Length: 20) | 673927 | Certain set of manufacturers may mention batch number details. (This field is mandatory only if this section is selected) |
| A.1.4. 2 | Batch_Expir ÿ_ Date | 01 | Batch Expiry Date | Option al | String (DD/MM/YYYY) | 21/1 1/2019 | Expiry Date of the Batch, if any |
| A.1.4. | Warranty_D | 01 | Warranty Date | Option al | String (DD/MM/YYYY) | 21/11/2019 | Warranty date for the Item, if any. |
| | Attribute Defails of Item | Û.n | | Opiron al- | | | Header for Annexure A I Statistic Details of Item |
| | Parameter Name | Cardi nalitiy | Description / | Wheth or manda tory or | Field Specific ations | Sample Value | Explimatory potes |
| | | | | obtion | | | |
| A.1.5. | Attribute_N ame | 01 | Attribute Name | Option al | String (Max Length: 100) | Colour | Attribute Name of the item. |
| A.1.5. 2 | Attribute_V alue | 01 | Attribute Value | Option al | String (Max Length: 100) | Red, green, etc. | Attribute Value of item.". |

In pursuance of the provisions of clause (3) of Article 348 of the Constitution of India, the Governor is pleased to order the publication of the following English translation of the Notification No. 688/2020/6(120)/XXVII(8)/2020/CT-60, dated September 16, 2020 for general information.

NOTIFICATION

September 16, 2020

No.688/2020/6(120)/XXVII(8)/2020/CT-60--In exercise of the powers conferred by Section 164 of the Uttarakhand Goods and Services Tax Act, 2017 (Act No. 06 of 2017), the Governor, on the recommendation of Council, is pleased to make the following rules to further amend the Uttarakhand Goods and Services Tax Rules, 2017, namely:--

The Uttarakhand Goods and Services Tax (Ninth Amendment) Rules, 2020

Short Title and Commencement

- (1) These rules may be called the Uttarakhand Goods and Services Tax (Ninth Amendment) Rules, 2020.
 - (2) They shall come into force from 30th July, 2020.

Amendment in FORM GST INV-01

2. In the Uttarakhand Goods and Services Tax Rules, 2017, for FORM GST INV-01, the following form shall be substituted, namely:-

"FORM GST INY-1

(See Rule 48)

Format/Schema for e-Invoice

Note 1: Cardinality means whether reporting of the item(s) is mandatory of optional as explained below:

0. It it means that reporting of item is optional and when reported the same cannot be repeated.

1..1; It means that reporting of item is mandatory but cannot be repeated.

I..n: It means that reporting of item is mandatory and can be repeated more than once.

0..n: It means that reporting of item is optional but can be repeated more than once if reported. For example, previous involve reference is optional but if required one can mention many previous involve references.

Note 2: Field specification Number (Max length: m, n) indicates 'm' places before decimal point and 'n' places after decimal point. For example, Number (Max length: 3:3) will have the format 999.999

| | | | | | | | invoice schema. It will be used to keep track of version of Invoice specification. |
|-----|------------------------|-----|---------------------|--------------------------------|------------------------|-----|--|
| 1.0 | Version | 11 | Version Number | Mandatory | String (Max. Length:6) | 1.1 | This is version of the e- |
| | Basic Details | 1.7 | | Mandatory | | | Header for Basic Details |
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| | ename delhe Esitale | | Calvistom through a | e destitation People in the | | | See State of the Notice with |

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|---------|------------------------|------|---------------------------------------|--------------|----------------------------|--|--|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1.1 | IRN | 1) | Invoice Reference Number | Mandatory | String (Length: 64) | a5c12dca80 e7433217 ba4013750 f2046f229 | This will be a unique reference number for the invoice. |
| | 1 | | | | | | However, the supplier wil not be populating this field |
| | | | | | | | The registration request may not have this field populated |
| | | | | | | | The Invoice Registration Portal (IRP) will generate this IRN and respond to the registration request. |
| | | | • | | | | e-livoice is valid only when it has the IRN. Hence, this is marked as mandatory field. |
| 1.2 | Supply_Typ e_Code | 11 | Code for Supply Type | Mandatory | Enumerated List | B2B/B2C/S EZWP/SEZ WOP/EXP | This will be the code to identify type of supply. |
| | | | | | | WP/EXPW OP/DEXP | B2B: Business to Business B2C: Business to Consumer |
| | | | | | | | SEZWE To SEZ with Payment SEZWOP: To SEZ without Payment |
| | | e . | | ger en state | | ar i i i i | EXPWP: Esport with Payment |
| | | | *** *** *** * * * * * * * * * * * * * | | | | EXPWOR: Export without Payment |
| | | | | | | | DEXP: Deemed Export |
| | Document_T ype_Code | | Code for Document Type | Mandatory | Enumerated List | INV/CRN IDBN | Type of Document: INV for Involve, |
| | | | | | | | CRN far Credit Note, BBN for Debit note. |
| 1.4 | Document_ Num | ka a | Dacument Number | | String (Max Length: 16) | Sa/1/2019 | This is as per-relevant rule in CGS [/SGS]/UTGST Rules. |
| | Document_ Date | 1.1 | | Magchatory, | Shing (BD/MIN/YYYY) | @1/07/2019 | The date on which the trivoire was issued Formation DEMINISTRY |
| 1.6 | Additional | 0.1 | Additional | Optional | | JJSD, EJJR | The beids is for reporting |
| | Currency C | | Currency Cade | | | | addinonal correctey, If any, in which all invoice amounts cambbe given, along with this |
| | | At 1 | | | | | One such additional currency may be used in the invoice, as oer list published under ISO 1217 standard. |
| | | | | | | | ist published and updated from time to time at https://www.icegate.gov.in/ |

| 464 | 75 | तराखण्ड | गजट, 07 नवम | बर, 2020 इ | ० (कातिक १६, १९४२ | शक सम्बत् |) [भाग 1—क |
|---------|---|---------|--|-------------------------|------------------------|------------|--|
| 1 | . 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1.7 | Reverse Cha rge | 01 | Reverse Charge | Optional | String (Length:1) | Y | Whether the tax liability payable is under Reverse Charge. |
| 18 | IGST_Appli cability_desp ite_Supplier and_Recipi ent_located_ in_same_ State/UT | 01 | IGST Applicability despite Supplier and Recipient located in same State/UT | Optional | String (Length: 1) | . 'N | To report the scenarios where the supply is chargeable to IGST despite the fact that the Supplier and Recipient are located within same State/UT |
| 2. | Document Period | 01 | | Optional- | | | Header for Document Period |
| 2.1 | Document_P eriod_Start _Date | 11 | Document Period Start Date | Mandatory | String (DD/MM/YYYY) | 21/07/2019 | This is the start date of the document period (delivery/invoice period). |
| | | | | | | | (This field is mandatory only if this section is selected) |
| 2.2 | Document_P eriod_End_ Date | i,,1 | Document Period End Date | Mandatory | String (DD/MM/YYYY) | 21/07/2019 | This is the end date of the document period (delivery/invoice period). |
| , , , | | | · | | | | (This field is mandatory only if this section is selected) |
| | Preceding Document Contract Reference A / / / / Preceding Document Reference | 0.1 | | Option a Significant | | | Header (nath-econome and amico) contesco Reference Suppose Sup |
| 3.1.1 | Preceding D ocument Number | 1.1 | Preceding Document Number | Mandatory | String (Max length:16) | Sa/1/2019 | This is the reference of original document/invoice to be provided optionally in the case of debit or credit notes. |
| | | , | | ang a* | , a . | | Credit/Debit notes, against invoices can also be referred here. |
| | | | | | | | (This field is mandatory only if this section is selected) |
| 3.1.2 | Preceding D ocument Date | | Date of Preceding Document | Mandatory | String (DD/MM/YYYY) | 21/07/20 | Date of preceding document/invoice. (This field is mandatory only if this section is selected) |
| - 3.1.3 | Other_ Reference | 0:.1 | Other Reference | Optional | String (Max length:20) | KOL01 | This field is to provide any additional reference e.g. specific branch, their user ID, their employee ID, sales centre reference etc. |
| 3.2 | Receipt / O Contract References | | | Öptional . | | | Sub-heitter fol Receipt.//. Contract References |
| 3.2.1 | Receipt_Advi ce_Reference | | Receipt Advice Reference | Optional | String (Max length:20) | . | This reference is kept for user to provide number of their receipt advice to their customer, in lieu of advance. |
| 3.2.2 | Receipt_Advi ce _Date | | Date of Receipt Advice | Optional | String (DD/MM/YYYY) | 21/07/2019 | Date of issue of receipt advice for advance. |

| 411-1 | 1-45] | | व्ययखण्ड गजर | 5, 07 HQF4 | बर, 2020 इं0 (कातिव | 16, 1942 | शक सम्बत्) ४६ |
|-------|-------------------------|--------------------|----------------------------|-----------------------|-----------------------------|--|---|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 3.2. | oi_Reference | | Tender or Lot Reference | Optional | String (Max length:20 | N2020 | mentioning number or detai of Lot or Tender, if supplie are made under such Lot of tender. |
| 3.2.4 | Contract_Ref | 01 | Contract Reference | Optional | String (Max length:20 |) CÓNT2307 | This reference is kept for mentioning contract number if supplies are made under an specific Contract |
| 3.2.5 | External_Ref erence: | 01 | External Reference | Optional | String (Max length:20 | EXT23222 | An additional field for provision of any additional/external reference number for the supply. |
| 3.2.6 | Project_Refe rence | 01 | Project Reference | Optional | String (Max length: 20) | PJTCODE0 | This reference is kept for mentioning project number if supplies are made under any specific project |
| 3.2.7 | PO _Ref_Num | 01 | PO Reference Number | Optional | String (Max length: 16) | Vendor PO /1 | This is the reference number of Purchase Order |
| 3.2.8 | PO_Ref_Dat | Ø. I | PO Reference Date | Optional | String (DD/MM/YYYY) | 21/07/2019 | This is the date of Purchase Order. |
| 44.7 | | | | wjędojątok Gartina | | | Herger Gre 37 Supplies |
| 4.1 | Supplier Le gal Name | 11 | Supplier Legal Name | Mandatóry | String (Max. length: 100) | XYZ Ltd. | Legal Name, as appearing in PAN of the Supplier |
| 4.2 | Supplier_Tra de_Name | 0.1 | Trade Name of Supplier | Optional | String (Max length: 100) | ABC Tradets | A name by Whith the Supplier is known, i.e. Business Name, other than legal name |
| 4.3 | Supplier GSTIN | | GSTIN åt Supplier | Mandatory | String (Length: 15) | 29AADFV7 389C1ZX | GSTIN of the Supplier |
| 4.4 | Supplier A oures | | Súpplier Address 1 | Mandators | String (Max length: 100) | # (-23-120) Flat No. 3, Nalanda Aparimenta, MG Road, Vasanth Nagar | Address I of the Supplier (Building/Flat no., Road/Street, Locality etc.) |
| 4.5 | Supplier A ddress2 | | Supplier Address 2 | Optional | String (Max length: 100) | Nalanda | Address 2 of the Supplier (Building/Flat no., Road/Street, Locality etc.), if any |
| 4.6 | Supplier Pla | 1,.1 | Supplier Place | Mandatory | String (Max length:50) | Bangalore | Location of the Supplier (City/Town/Village) |
| 4.7 | Supplier Sta te Code | ii | applier State Gode | Mandatory | Enumerated List | | State Gode of the Supplier as per GST System List published and updated from time to time at https://www.icegate.gov.in/ Webappl/STATE_ENO |
| 1.8 | Supplier Pin 1 code | _1 S | upplier PTN | Mandatory | Number (Length: 6) | | BIN Code of the Supplier Locality |
| 1.9 | Supplier_P C |) ₀ 1 S | upplier Phone | Optional | String (Max length: 12) | | Contact number of the Supplier |
| 1.10 | Supplier_Em 0 | S | upplier e-mail | Optional | String (Max length: 100) | bc.com [| e-mail ID of the Supplier, as per REGEX (Regular Expressions) pattern |

| | | | 1010, 01 14 | ., | 0 (411(14) 10, 1942 | , | [7]] |
|-------------|------------------------------------|----|---------------------------------|-----------|------------------------------|--|--|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 5. | Recipient Information. | 11 | | Mandatory | | 3 | Header for Recipient Information |
| | 1 | | | | | | |
| 5.1 | Recipient_L egaName | 11 | Recipient Legal Name | Mandatory | String (Max. length: 100) | PQR Pvt. Ltd. | It will be legal name of recipient, as per PAN. |
| 5.2 | Recipient_Tr ade_Name | 01 | Recipient Trade Name | Optional | String (Max length:100) | Adarsha | It will be trade name of recipient, if available. |
| 5.3 | Recipient_G STIN | 11 | GSTIN of Recipient | Mandatory | String (Length:15) | 29ABCCRI 832CIZX, URP | GSTIN of the Recipient, if available. URP: In case of exports or if supplies are made to |
| 5.4 | Place_Of_Su pply_State_ Code | 11 | Place of Supply (State Code) | Mandatory | Enumerated List | 29, 96 | unregistered persons Code/State Code of Place of Supply as per GST System. List published and updated from time to time at https://www.icegate.gov.in/ Webappl/STATE_ENG |
| 5.5 | Recipient_A ddress1 | 11 | Recipient Address I | Mandatory | String (Max length:100) | # 1-23-120, Flat No. 3, Nalanda Apartments, MO Road, Vasanth Nagar | Address I of the Recipient (Building/Flat no., Road/Street, Locality etc.) |
| 5.6 | Recipient_A ddress2 | 01 | Recipient Address 2 | Optional | String (Max length: 100) | # L-23-120, Flat No. 3, Nalanda Apartments, MO Road, Vasanth Nagar | Address 2, if any, of the Recipient (Building/Flat no., Road/Street, Locality etc.), if any |
| 5.7 | Recipient_P | 11 | Recipient Place | Mandatory | String (Max length:100) | Mysore | Location of the Recipient (City/Town/Village) |
| 5.8 | Recipient St ate_Code | 11 | Recipient State Code | Mandatory | Enumerated List | 29 | Code/State Code of the Recipient. List published and updated from time to time at https://www.icegate.gov.in/Webappl/STATE_ENO |
| 5.9 | Recipient_ Pincode | 01 | Recipient PIN Code | Optional | Number (Length: 6) | 560002 | PIN code of the Recipient locality. |
| 5.10 | Country_Co | 01 | Country Code of | Optional | Enumerated List | AN | In case of export, Pincode need not be mentioned. Code of country of export as |
| | de_of_Expor t | | Export | | | | per ISO 3 i 66-1 alpha-2 / Indian Customs EDI system. List published and updated from time to time at https://www.icegate.gov.in/Webappi/COUNTRY_ENO |

| 411.1 | | 1 | त्रसाख्य-७ नजट, | | E050 40 (+1) | (17 10, 1012 \ | 147 (1-4(1) 46 |
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| 1 | 2 | 3 | 4 | 5 | 6 | 7. | 8 |
| 5.11 | Recipient_P hone | 0.1 | Recipient Phone | Optional | String (Max lengt | h:12) 0802223323 | Confact number of the Recipient |
| 5.12 | Recipient_e mail_ID | Ò1 | Recipient e-mail ID | Optional | String (Max length:100) | billing@xyz .com | e-mail ID of the Recipient, as per REGEX (Regular Expressions) pattern |
| 6 | Payee- Toformation | 0.1 | | Optional | | | Header for Paye Information |
| 6.1 | Payee_Name | 01 | Payee Name | Optional | String (Max length: 100) | Ramesh K | Name of the person to whom payment is to be made |
| 6.2 | Payec_Bank _A ccount_Num | 01 | Payee Bank Ascount Number | Opțional | String (Max length:18) | 3868501747 262 | Bank Account Number of Payee |
| 6.3 | Mode_of_Pa | 01 | Mode of Payment | Optional | String (Max length:18) | Direct Transfer | Mode of Payment: Gash/Gredit/Direct Transfer etc. |
| 6.4 | Bank _Branch_Co de | 01 | Bank Branch Code | Optional | String (Max length: [1] | SBIN98765 43 | Indian Financial System Code (IFSC) of Payer's Bank Branch |
| 6.5 | Payment_Te rins | 01 | Payment Terms | Optional | String (Max length:100) | Text | Terms of Payment, If any, with the Resipient can be provided. |
| 6.6 | Payment_Instruction | 0.1 | Payment Instruction | Optional | String (Max length:100) | Теж | Instruction, if any, regarding payment can be provided |
| 6.7 | Credit_Trans fer_Terms | | Credit Transfer Terms | | String (Max length: 100) | Тех | Terms to spesify credit transfet payments. |
| 6.8 | Direct Debit Terms | | Direct Debit Tesms | Optional | String (Ma x length: 160) | Text | Terms, if any, to specify a direct debit. |
| 6.9 | Credit_Days | 0.1 | Credit Days | Optional | Númeric (Max length:4) | 30 | Number of days within which payment is the |
| | | | -1 | gordanine la La protesta | | | agetagy some sublices until micking vif |
| 7.1 | Ship_To_De; iails | 0,.1 | Skip To Details | O ptional | Refer A.I.D | | Details of location to which the supply hos to be delivered. |
| 7.2 | Disputch_Fr om_Details | 01 | Dispåtch From Details | Optional . | Refer. A.L.I | | Details of location from where Supply has to be dispatched. |
| | | | | | | | all ngaya na arawa na ar Afrika ya yang arawa sala |
| 8.1 | ltem_List | In | item List | Mandatory | Refer. Al. 2 | | Provides information about the goods and services being involced. |

| 158 | 121 | 1616000 | 4,4C' 01 4d*s | 14, 2020 \$ | ० (कार्तिक 18, 19 | 42 शक सन्वत् |) भाग १–क |
|------|---------------------------------|---------|-----------------------------------|--|--------------------------------|---------------------------------|---|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 9. | Document Liucil | 1. | | Man datory | | | Header for Document Total Details |
| 9.1 | Document_ Total_Detail | 1.,1 | Document Total Details | Mandatory | Refer / | <u> 1</u> 4 <i>1.3</i> | Details of document total including taxes. |
| 10. | Extra: Information | 01 | | Option | | | Header for Extra |
| | | | | AL ALLEY | | | |
| 10.1 | Tax_Scheme | 11 | Tax Scheme | Mandatory | String (Max length: 10) | GST | To specify the tax/levy applicable – GST (This field is mandatory only if this section is selected) |
| 10.2 | Remarks | 0., j | Remarks | Optional | String (Max length: 100) | New batch Items submitted | A textual note that gives unstructured information that is relevant to the Invoice as a whole e.g. reasons for any correction or assignment note in case the invoice has been factored etc. |
| 10.3 | Port_Code | 01 | Port Code | Optional | Enumerated List | Alpha | In case of export/supply to SEZ, port code can be mentioned as per Indian Customs EDI System (ICES), if applicable and available at the time of reporting e-invoice. Lists published and updated from time to time at below URLs: EDI Port Codes: https://www.icesate.gov.in/ |
| 10.4 | Shipping Bi | 01 | Shipping Bill Number | Optional | String (Max length: 20) | Alpha | Webappl/LOCATION EN O Non-EDI Port Codes: https://www.icegate.gov.in/ Webappl/nonlocation.det a Illisp In case of export/supply to SEE, shipping bill number as |
| | | | | and the state of t | | | per Indian Customs EDI System (ICES), can be mentioned, if applicable and available at the time of reporting e-invoice. |
| 10.5 | Shipping_Bi | 01 | Shipping Bil! Date | Optional | String(DD/M M/YYYY) | 03/12/2020 | Date of Shipping Bill as per Indian Customs EDI System (ICES) |
| 10.6 | Export_Duty _Amount | 01 | Export Duty Amount | Optional | Number (Max Length: 12,2) | 1200000.50 | Amount of Export Duty in INR, if any, applicable (in case of invoices for export) |
| 10.7 | Supplier_Ca n_Opt_Refu nd | 01 | Supplier Can Opt Refund | Optional | String (Length: 1) | Y/N | In case of deemed export supplies, this field is for mentioning whether supplier can exercise the option of claiming refund or not. |
| 10.8 | ECOM_GST IN | 01 | e-Commerce Operator's GSTIN | Optional | String (Length: 15) | 29ABCCR183 2C1CX | GSTIN of e-commerce operator, if supply is made through him/her. |

| 21,1 | [—41] | | Cities de delc | , 01 गपन्थर | , २०२० इ० (काति | 4P 10, 1942 x | तक सन्वत्। ४६६ |
|------|---|------|--|--------------|------------------------------|---|--|
| | | 3 | 4 | . 5 | 6 | 7 | 8 |
| | | | | Optional | | | Header for Additional Supporting Documents |
| 11. | | | Additional Supporting Documents URL | Optional . | String (Max length: 100) | hitp://www.xy z.com/abc | This is to enter URL reference of additional supporting documents, if any: |
| 11.2 | Additional_ Supporting: _Documents _base64 | 01 | Additional Supp orting Document in base64 | Optional | String (Max length: 1000) | Base 64 encoded Document | This is to add any additional document in PDF/Microsoft Word in Base64 encoded format. |
| 11.3 | nformation | 01 | Additional Information | Optional | String (Max length: 1000) | Free text, remarks, identifiers, etc. | Any additional information, names, values, data etc. that is specific for the Supplier-Regiplent transaction e.g. CIN, trade-specific information, Drug Licence Reg. No., FOB/CIF etc. |
| | P.Way Pill? | | | Opinora) | | | Allenderplotes was Bill as Totals as |
| [2.] | Transporter_I | 01 | Transporter ID | Option al | String (Length: 15) | 29AADFV758 9C1ZO | Registration / Enrolment Number of the transporter |
| | | | | , | | | (This field is required if Pari-A of E-waybill has to be generated) |
| 12.2 | Trans_Mode | | Mode of Transportation | Optional | Enumerated List | 1/2/3/4 | Option to be provided based on mode of transport available on e-Way Bill Portal |
| | | | | | | | 1 for Road; 2 for Rail; |
| : | | | | | | | 3 for Air; 4 for Ship |
| .43 | Same State of the | | | 47.77 | | | (This field is required if Pari-B of e-way offil is also to be generated) |
| 12,3 | Trans_Distan | ii [| Distance of Fransportation | | Number (Max length: 4) | 200 | Distance of Transportation (This field is mandatory only if this section is selected) |
| 12.4 | Transporter_ Name | | Cransporter Name | Optional | String (Max length: 100) | Sphurthi Transporters | Name of the Transporter . |
| 12.5 | Trans_Doc_No. | I | Transport Document Number | | String (Max length: | | Transport Document Number (This field is mandatory if mode of Transport is Rail or Air or Ship) |
| 12.6 | Trans_Doc_ Dáte | | Fransport Document Date | Óptional (| String DD/MM/YYYY) | 21/07/2019 | Date of Transport document. (This field is mandatory if mode of Transport is Rail or Air or Ship) |

| 1 | | 1 | | | इ ७ (कातिक 18, 1 ! | #4Z राक स+वत | () [भाग 1—क |
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| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 12.7 | Vehicle_No. | 0. 1 | Vehicle Numbe | r Optional | String (Max. length: 20) | KA 12KA 1234 or KA 12K 1234 | Vehicle Registration Number |
| 12.0 | | | | | | or KA123456 or KAR1234 | mode of Transport is Road) |
| 12.8 | Vehicle_Typ | 01 | Vehicle Type | Optional | Enumeration List | O/Ř | To mention nature of vehicle: |
| | | | | | * | | O: Over-Dimensional Cargo |
| | | | | | | | R: Regular |
| | | | | | | | (This field is mandatory if Part-B of e-way bill is also to be generated) |
| A 1.0 | Ship To Details | | | Optional | | | Header for Annexura A 11 1.0: Ship To Details # |
| Sr. No. | Parameter Name | Carati nality | Descelption | Whether optionator mandatory | 是特殊的政策。 | Sample Value | sers Explainatory Notes |
| | | | 4 (a) 15 | | ACTIVITY OF CASE | | |
| A,1.0. | Ship To Lega Name | 11 | Ship To Legal Name | Mandatory. | String (Max length: 100) | ABC-1 Ltd. | Legal Name of the entity to whom the supplies are shipped to. |
| A.1.0. | ShipTo_Trad | 01 | D1.1. (D. (D) | | | | (This field is mandatory only if this section is selected) |
| 2 | e_Name | U., I | Ship To Trade Name | Optiona) | String (Max length: 100) | XYZ-1 | Trade Name of the entity to whom the supplies are shipped to. |
| A.1.0.` | ShipTo_GST IN | 01 | Ship To GSTIN | Optional | String (Length: 15) | 36AABCT222 3Lize | OSTIN of the entity to whom the supplies are shipped to. |
| A.T.0. 4 | ShipTo_Addr ess1 | | Ship To Address I | Mandatory | String (Max length: 100) | Flat No. 2, Priya Towers, Omega Road, Srinivasa Nagar | Address I of the entity to whom the supplies are shipped to (This field is mandalory only if this section is selected) |
| A.1.0. 5 | ShipTo_Addr ess2 | | Ship To Address2 | Optional | String (Max length: 100) | Flat No. 2, Priya Towers, Omega Road, Sriniyasa Nagar | Address 2, if any, of the entity to whom the supplies are shipped to |
| A.1.0. 6 | ShipTo_Place | 11 | Ship To Place | Mandatory | String (Max length: 100) | Bangalore | Place (City/Town/Village) of entity to whom the supplies are shipped to. |
| | | | | | | | (This field is mandatory only if this section is selected) |
| A.1.0. 7 | ShipTo_Pinc ode | | Ship To Pincode | Mandatory | Number (Max length: 6) | | PIN code of the location to which the supplies are shipped to. |
| | | | | | | | (This field is mandatory only if this section is selected) |
| A.1.0. 8 | Ship_To_Stat e_Code | | Ship To State Code | Mandatory | Enumerated List | 29 | Code/State Code (as per GST System) to which the supplies are shipped to. |
| | | | | | | | List published and updated from time to time at https://www.icegate.gov.in/ |
| | | | | | | | Webappi/STATE_ENQ |

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| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| | | | | - | | | (This field is mandatory only if this section is selected) |
| A | Dispatch From | 0.1 | | Optional | | | Header for Annexure A L1: Dispatch From Details |
| SP. | Parameter | Cardi | Description - | Whether mandator | Field Specific | Sample Value | Explanatory Notes |
| A 1 1 | DispatchFro | | Dispatch From | optional Mandatory | String | XYZ-2 | Name of the entity from |
| A.1.1. | m_Name | 11 | Name | iviandatory | (Max length: 100) | | which goods are dispatched. (This field is mandatory only |
| | Language and the stage of the s | | -10 AV- | | | | if this section is selected). |
| A.1.1. 2 | Dispatch From Address I | 1.1 | Dispatch From Address I | Mandatory | String (Max length: 100) | Building No. 4/2; Flat No. 3, Kakatiya. | Address 1 of the entity from which goods are dispatched. |
| ,,. | | | | | | Apartmenis, Vasanın Nagar | (This field is mandatory only if this section is selected) |
| A.1.1. | DispatchFro m_Address2 | 01 | Dispatch From Address2 | Optional | String (Max length: 100) | Building No. 4/2, Flat No. 3, Kakatiya Apartments, Vasanth Nagar | Address 2 of the entity from which goods are dispatched. |
| A:1.1: | DispatchFro m_Place | f.a | Dispatch From Place | Mandatory | String (Max length: 100) | Bangalore. | Place (City/Town/Village) of the entity from which goods are dispatched. |
| | | | | | | | (This field is mandatory only if this section is selected). |
| A.1.1. 5 | Disputch From State_Co | 41 | Dispatch From State Code | Mandatory | Enumerated List | 29 | Code/State Code of the entity (as per OST System), from which goods are dispatched. |
| | | | | | | | List published and updated from time to time at https://www.icegate.gov.in/ |
| | i. | | Carl tak sew | | | * | (This field is maridatory only if this section is selected) |
| A.1.T. | DispatchFro m_Pincode | 11 | Dispatch Rrom . Pincade | Mandatory | Number (Length: 6) | 560087 | Pincode of the locality of entity from where goods are dispatched. |
| | | | | <u> </u> | l <u>o don</u> como di | | (This field is mandatory only If this section is selected) |
| | | | | Marie Tra | | | Treade on Annexus. |
| | | | Official priors | e Marciniae omercialos of organism december | en los necholinos Necesarios de Encresarios de la | Stantoll | |
| A.1.2. | SI_No. | 1.31 | Serial Number | Mandatory | String (Max length: 6) | 1,2,3 | Serial number of the item |
| A.1.2. 2 | Item_Descri ption | 01 | Item Description | Optional | String (Max length: 300) | Mobile | Description of the item |
| A.1.2. | ls_Service | lal e | Service. | Mandatory | String (Length: 1) | Y/N | Specify whether supply is service or not. |

| 1 | · · · · · · · · · · · · · · · · · · · | | | 1 | (0 (+11(1 + 10, 11 | | 1 |
|--------------|---------------------------------------|------------|-------------------------|-----------|-------------------------------|-------------|---|
| 1_1_ | . 2 | 3 | 4 | 5 | 6 | 7 | . 8 |
| A.1.2. | HSN_Code | 1,,! | HSN Code | Mandatory | String (Max length: 8) | 1122 | To enter applicable HSN / SAC Code of Goods / Service |
| A.1.2. 5 | Batch Details | <i>0</i> J | | Optional | Refer A 1.4 | | Some manufacturers may mention batch details (in Section A 1.4) |
| A.I.2. 6 | Barcode | 01 | Barcode | Optional | String (Max length: 30) | b123 | Barcode, if any, of the item. |
| A.1.2. 7 | Quantity | 01 | Quantity | Optional | Number (Max length: 10,3) | 10 | The quantity of items to be mentioned in the invoice. |
| | | | | | | | This is mandatory only in case of goods. |
| A.1.2. 8 | Free_Qty | 01 | Free Quantity | Optional | Number (Max length: 10,3) | 99 | Quantity of item(s), if any, given free of charge (FOC) |
| A.1:2. 9 | Unit_Of_Me asurement. | 01 | Unit of Measurement | Optional | String (Max length: 8) | Вох | The Unit of Measurement (UOM), if any, applicable on invoiced goods. |
| A.1.2. 10 | Item_Price | 11 | Item Price | Mandatory | Number (Max length: 12,3) | 500.5 | Price per unit item. |
| A.1.2. | Gross_Amou nt | 11 | Gross Amount | Mandatory | Number (Max length : 12,2) | 5000 | The gross price of an item (cost multiplied by quantity - rounded off to 2 decimal), exclusive of taxes. |
| A.1.2. 12 | Item_Discou nt_Amount | 01 | Item Discount Amount | Optional | Number (Max length: 12,2) | 10.25 | Discount amount, if any, for the item. |
| A.1.2. 13 | Pre_Tax_Vai | 01 | Pre-Tax Value | Optional | Number (Max length: 12,2) | 99.00 | If pre-tax value is different from taxable value, mention the pre-tax value and taxable values separately. In some cases, the pre-tax value may be different from |
| | | | | | | | For example, where old goods are exchanged for new ones (e.g. new phone supplied for INR 20,000 along with exchange of old phone then pre-tax value would be INR 20,000 and taxable value would be INR 24,000, assuming exchange value of old phone is 4,000. |
| | | | | | | - | Another example is in the case of real estate where pre- tax value may be different from taxable value. |
| | Item_Taxabl e_Value | | Item Taxable Value | | Number (Max length: 12,2) | 5000 | This is the value on which tax is computed. Value cannot be negative. |
| A.1.2. 15 | GST_Rate | 11 | GST Rate | | Number (Max length: 3,3) | | The GST rate, represented as percentage that applies to the nvoiced item. It will be GST rate or sum of CGST & GGST Rates. |

| 41141 3- | 47] | | arried-6 -juje | , 01 19-95 | , २०२० इंग (काति | y 10, 1072 | राक रान्परा) 4/3 |
|--------------|--|----|--|------------|---------------------------------|------------|--|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| A.1.2. 16 | IGST_Amt | 01 | IGST Amount | Optional | Number (Max Length: 12,2) | 999.45 | Amount of IGST payable per item (rounded off to 2 decimals). If IGST is reported, then CGST & SGST/UTGST will be blank. For taxable supplies, either IGST or CGST & SGST/UTGST should be reported. |
| A.1.2. | CGST_Amt | 10 | CGSŤ Amount | Optional | Number (Max Length: 12,2) | 650.00 | Amount of CGST payable per item (rounded off to 2 decimals). If CGST is reported, then SGST/UTGST has to be reported and IGST will be blank. |
| A.1.2. 18 | SGST_UTG ST.Amt | Ö1 | SGST/UTGST Amount | Optional | Number (Max length: 12,2) | 650.00 | Amount of SGST/UTGST payable per item(rounded off to 2 décimals). If SGST/UTGST is reported, then CGST must be reported and ICST will be blank. |
| A1.2. 19 | Comp_Cess_ Rate_Ad_val orem | 01 | Compensation Cess Rate, Ad Valorem | Optional | Number (Max length: 3,3) | 2.5% | Ad valorem Rate of GST Compensation Cess, applicable, if any |
| A1.2. 20 | Comp_Cess_ Amt_ Ad_Valorem | 01 | Compensation Cess Amount, Ad Valorem | Optional | Number (vlax length: 12,2) | 56.00 | GST Compensation Cess amount, ad valorem (rounded off to 2 decimals) (based on value of the item). |
| A1.2. 21. | Comp_Cess_ Amt_Non_A d_Velorem | 1 | Compensation Cess Amount, Non ad valorem | Optional | Number (Max length:12,2) | 23.00 | GST Compensation Cess amount, computed by the basis other than value of item (i.e. specific cess amount computed based on quantity, number sic.) |
| A1.2. 22 | Rate ad val | | State Cess Rate, As Valorem | Optional | Number (Ivlax length: 3,3) | 1.5% | Ad valorem Rate of State/UT Cess; applicable, If any |
| A1.2. 23 | orem State Cess Amt_Ad_Va lorem | | State Cess Amount, ad valorem | Optional. | Number (Max length: 12,2) | 43.00 | State/WT Cess amount, ad valorem (based on value of the item) |
| 24 | Amt Non A | | State Cess Amount, 100 dd vâlorem | Optional | Number (Max length: 12,2) | 12.00 | State/UT Cess amount, computed on the basis other than value of item file. specific cess amount computed based on quantity, number etc.) |
| 25 | Other Charges es Item Lew | | Other Charges litem level) | Optional | (Max fength: 12,2) | 874.95 | Any other charges applicable at item level. These may not be part of taxable value, e.g. in case of pure agent reimbursement. |
| 26 | Purchase_Or der_Ling_Re ference | | Purchase Order Line Reference | Optional | String (Max length: 50) | 746/ABC/01 | Reference of Purchase Order Line |
| | Item_Total_ \ | | tem Total Amount | Mandatory | Number (Max length: 12,2) | 5000 | The item total value that includes all taxes, cesses, as well as other charges. However, this value excludes |
| | | | | | | | discount, if any. |

| 474 | 97 | रिखिष्ट | गजट, ७/ नवम्ब | r, 2020 | इ० (कातिक 16, 194 | 2 राक सम्पत् | [भाग 1-क |
|---------------|-----------------------------------|----------------|-------------------------------|--------------------------------------|-------------------------------|--------------|--|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| A 1 2 1 28 | Origin_Coun try_Code | 01 | Code of Country of Origin | Optional | Enumerated List | DZ | This is to specify country of origin of the item, e.g. mobile phone sold in India could be manufactured in other |
| | | | | | | | Code of country of export as per ISO 3166-1 alpha-2 / Indian Customs EDI system (ICES). |
| | | | | • | | | List published and updated from time to time at https://www.icegate.gov.in/Webappi/COUNTRY ENO |
| A.1.2, 29 | Unique_Seri al_Number | 01 | Unique Serial Number | Optional . | String (Max length: 20) | 553 | Serial number, in case of each item having a unique number. |
| A.1.2. 30 | Product_Att ribute_Detai is | 0n | Optional | | Refer A 1.5 | | Attribute details of product |
| 1,675.77 | Total Details | 1.1 | | Manda tory | | | Heaverfor Amexure A 1.3. Document Total Details |
| 3.6 | | Candi Mahry | Desgription | Whethe maddat devior getons | Field Speaffic atlibus | Sample Value | Explanatory Note |
| A.1.3. I | Taxable_Value_Total | 11 | Total Taxable Value | Mandat ofy | Number (Max length: 14,2) | 768439.35 | This is the sum of the taxable values of all the items in the document. |
| À.1.3. 2 | IGST_Amt_ Total | 01 | Total IGST Amount | Optiona 1 | Number (Max length: 14,2) | 265.50 | Total IGST amount for the invoice. |
| | • . | | | | | | Appropriate taxes based on rule will be applicable. |
| , | . , | | | | • * | ٠. | For example, either of CGST & SGST/UTGST or IGST will be mandatory. |
| ; , | | | | | | | As this is conditional mandatory, it is marked as optional. |
| A.1.3. 3 | CGST_Am_ Total | 01 | Total CGST Amount | Option al | Number (Max length: 14,2) | 65.45 | Total CGST amount for the invoice. |
| | | | | - | , | | Appropriate taxes based on rule will be applicable. For example, either of CGST & SGST/UTGST or IGST |
| | | | | | | | will be mandatory. As this is conditional mandatory, it is marked as 'optional' |
| A.1.3. | SGST_UTG S'f_Amt_To | 10 | Total SGST/UTGST Amount | Option al | Number (Max length: 14,2) | 65.45 | Total SGST/UTGST amount for the invoice. |
| | ,,,, | | | | | | Appropriate taxes based on rule will be applicable. For example, either of CGST & |

| | - 4 | - | | , | 14 2020 40 1111 | | <u> </u> |
|--------------|-------------------------------------|---------------------------------|--------------------------------------|---------------|------------------------------|--|---|
| 1 | , 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| | | | | | | | SGST/UTGST or IGST will be mandatory. |
| | | | | | | , | As it is conditional mandatory, it is marked as optional' |
| A, 1.3. 5 | Comp_Cess _Aml_Total | 01 | Total Compensation Cess Amount | Option al | Number (Max length 14,2) | 24.95 | Total GST Compensation Cess amount for the invoice (ad valorem as well as non- ad valorem) |
| A.1.3. 6 | State_Cess_ Amt_Total | 01 | Total State Cess Amount | Option al | Number (Max length : 14,2) | 5.45 | Total State cess amount for the invoice (ad valorem as well as non-ad valorem) |
| A. I.3.7 | Discount_A mt_Invoice_ Level | Ò1 | Invoice Level Discount Amount | Option al | Number (Max length: 14,2) | 100.00 | This is Discount Amount, if any, applicable on total invoice value |
| 1.3.8 | Other_Charg es_Invoice_ Level | 01 | Other Charges (Invoice Level) | Option al | Number(Max length: 14,2) | 200.00 | This is Other charges, if any, applicable on total invoice value |
| 1.3.9 | Round_Off_ Amount | Q. 1 | Round Off Amount | Option al | Number (kjáx length: 2,2) | 31.21 | This is round off amount of total invoice value |
| | Total Involc | 45.00 | | 10 mg 32 | Number (Max length: | 745249678,50 | The total value of involce |
| 10 | e Value IN R | 11 | Total Invoice Value in INR | Mandar ory | Number (Max length: 14.2) | 743249078,30 | including taxes/GST and rounded to two decimals maximum. |
| A 1.3 .11 | Total Involc e_Value_RC NR | | Total Invoice Value in FCNR | Option a | Number (Max length: 14,2) | \$5729.65 | The lotal value of invoice in Additional Currency |
| A.1.3. | Paid_Amoun | 01 | Paid Amount | Optiona j | Nümber (Max length 14,2) | 8463,50 | The amount, if any, which into been paid in advance. It must be rounded to maximum 2 decimals. |
| | Amount_Du 6_ | Öi | Amount Due | Optiona. | Number (Max length: 14.2) | 98789.50 | The oldstanding amount due for payation. It must be rounded to maximum 2 decimals. |
| \$4671 J | | | | Aprilen il | | <u> </u> | decimals. |
| | | egaili ji jita di jaga da | aiverstration of | into-i | Jeglais ja eitse ettäinis. | Signification (graph #################################### | |
| | | | | ត្សព្រែក | | | |
| | Batch Numi ber | | Batch Number | | String (Max Length: 20) | 673927 | Gertain set of manufacturers may mention batch number details. (This field is mandatory only if this section is selected) |
| | Batch_Expir (y_Date | | Batch Expiry Date | Option al | String (DD/MMPYYYY) | 21/13/2019 | Expiry Date of the Batch, if any |
| | | | | | | | |
| | Warranty_D (|)l .y | Warranty Date | Option | String | 21/11/2019 | Warranty date for the Item, if |

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|-------------|---------------------------------|-----------------|-----------------|-------------------------------|-----------------------------|---------------------|--|
| A 1.5 | Attribute Details of Item | 0s | | Option al | | - | Header for Annexure A i.5: Attribute Details of Item |
| Sr. No. | Parameter Name | Cardi nality | Description | Wheth er manda tory or option | Field Specific ations | Sample Value | Explanatory notes |
| A.1.5. I | Attribute_N ame | 01 | Attribute Name | Option al . | String (Max Length: 100) | Colour | Attribute Name of the item. |
| A.1.5. 2 | Attribute_V alue | 01 | Attribute Value | Option al | String (Max Length: 100) | Red, green, etc. | Attribute Value of item.". |

अधिसूचना

16 सितम्बर, 2020 ई0

संख्या 689/2020/6(120)/XXVII(8)/2020/CT-61-चूँिक राज्य सरकार का समाधान हो गया है कि लोक हित में ऐसा करना समीचीन है;

- अतएव, अब, राज्यपाल, उत्तराखण्ड माल और सेवा कर नियम, 2017 के नियम 48 के उपनियम (4) द्वारा प्रदत्त शक्तियों का प्रयोग करते हुए, परिषद की सिफारिशों पर, अधिसूचना सं. 330/2020/ 5(120) /XXVII (8)/2020/CT-13 तारीख 20 मई, 2020 में निम्नलिखित संशोधन करने की सहर्ष स्वीकृति प्रदान करते हैं , अर्थात्:-

उक्तं अधिसूचना के पहले पैराग्राफ में-

- (i) "उन में भिन्न" शब्दों, के पहले "किसी विशेष आर्थिक जोन इकाई तथा" शब्द को अत:स्थापित किया जाएगा;
- (ii) "एक सौ करोड़ रुपये" शब्दों के लिए "पाँच सौ करोड़ रुपये" शब्द को प्रतिस्थापित किया जाएगा।

In pursuance of the provisions of clause (3) of Article 348 of the Constitution of India, the Governor is pleased to order the publication of the following English translation of the Notification No. 689/2020/6(120)/XXVII(8)/2020/CT-61, dated September 16, 2020 for general information.

NOTIFICATION

September 16, 2020

No. 689/2020/6(120)/XXVII(8)/2020/CT-61--WHEREAS, the State Government is satisfied that it is expedient so to do in public interest;

NOW, THEREFORE, In exercise of the powers conferred by sub-rule (4) of rule 48 of the Uttarakhand Goods and Services Tax Rules, 2017, the Governor, on the recommendations of the Council, is pleased to allow to make the following amendments in notification of the Government of Uttarakhand, No. 330/2020/5(120)/ XXVII(8)/2020/CT-13 dated 20th May, 2020, namely:—

In the said notification, in the first paragraph,

- (i) before the words "those referred to in sub-rules", the words "a Special Economic Zone unit and" shall be inserted;
- (ii) for the words "one hundred crore rupees", the words "five hundred crore rupees" shall be substituted.

अधिसूचना 16 सितम्बर, 2020 ई0

संख्या 690/2020/5(120)/XXVII(8)/2020/CT-62-राज्यपाल, उत्तराखण्ड माल और सेवा कर अधिनियम, 2017 (अधिनियम संख्या 06, वर्ष 2017) की धारा 164 द्वारा प्रदत्त शक्तियों का प्रयोग करते हुए, परिषद् की सिफारिशों पर, उत्तराखण्ड माल और सेवा कर नियम, 2017 को अग्रेत्तर संशोधित करने के लिए निम्नलिखित

नियम बनाते हैं, अर्थात् :-

उत्तराखण्ड माल और सेवा कर (दुसवां संशोधन) नियम, 2020

संक्षिप्त नाम और प्रारम्भ

- 1. (1) इन नियमों का संक्षिप्त नाम उत्तराखण्ड माल और सेवा कर (दसवां संशोधन) नियम, 2020 है।
 - (2) अन्यथा उपबंधित के सिवाएं ये नियम दिनांक 20 अगस्त. 2020 से प्रवृत्त होंगे।

नियम 8 में संशोधन

2. उत्तराखण्ड माल और सेवा कर नियम 2017 (जिसमें इसके पश्चात उक्त नियम कहा गया है) के नियम 8 में, उपनियम 4(क) के स्थान पर, 01 अप्रैल, 2020 से, निम्नलिखित उपनियम प्रतिस्थापित किया जाएगा, अर्थात्:-

"(4क) जहां कोई आवेदक, जो कि धारा 25 की उपधारा 6(घ) के अंतर्गत अधिसूचित व्यक्ति से भिन्न हो, आधार संख्या के अभिप्रमाणन के विकल्प का चयन करता है तो, उपनियम (4) के अंतर्गत आवेदन को भरते समय, 21 अगस्त, 2020 से प्रभावी, उसकी आधार संख्या का अभिप्रमाणन किया जायेगा और उन मामलों में आवेदन को भरे जाने की तारीख, वह तारीख मानी जायेगी, जो उसकी आधार संख्या की अभिप्रमाणन की तारीख़ या उपनियम (4) के अंतर्गत प्ररूप जीएसटी आरईजी-01के भाग ख में आवेदन के भरे जाने से पंद्रह दिन बाद की तारीख, दोनों में से जो भी पूर्वत्तर होगी।"

नियम 9 में र संशोधन 3. उक्त नियम में, नियम 9 में, 21अगस्त, 2020 से प्रभावी-

(i) उपनियम (1) में परंतुक के स्थान पर निम्नलिखित परंतुकों को प्रतिस्थापित किया जाएगा, अर्थात:-

"परंतु जहां कि कोई व्यक्ति, जो कि धारा 25 की उपधारा 6(घ) के अंतर्गत अधिसूचित व्यक्ति से भिन्न हो, नियम 8 के उपनियम (4क) में यथा विनिर्दिष्ट आधार संख्या का अभिप्रमाणन की प्रक्रिया में असफल रहता है या आधार संख्या के अभिप्रमाणन के विकल्प का चयन नहीं करता है, तो उसका रजिस्ट्रीकरण, उस व्यक्ति की उपस्थिति में, नियम 25 के अंतर्गत यथाविनिर्दिष्ट रीति के अनुसार उसके कारबार के स्थान का प्रत्यक्ष सत्यापन किये जाने के बाद, किया जायेगा:

परंतु यह और कि उचित अधिकारी, संबंधित कारणों को लिखित रूप से लेखबद्ध करते हुए और ऐसे अधिकारी के अनुमोदन से जिसका पद की संयुक्त आयुक्त के पद से नीचे नहीं है, कारबार के स्थान का प्रत्यक्ष सत्यापन किये जाने के स्थान पर, ऐसे दस्तावेजों को सत्यापन कर सकता है जिसे वह उचित समझे";

(11) उपनियम (2) में स्पष्टीकरण से पहले, निम्नलिखित परंतुक अंतःस्थापित किया जायेगा, अर्थात्रः

"परंतु यह और कि जहां कोई व्यक्ति, जो कि धारा 25 की उपधारा 6 (घ) के अंतर्गत अधिसूचित व्यक्ति से धिना हो, नियम 8 के उपनियम (4क) में यथाविनिर्दिष्ट आधार संख्या का अभिप्रमाणन की प्रक्रिया में असफल रहता है या आधार संख्या के अभिप्रमाणन के विकल्प को चयन नहीं करता है, तो प्ररूप जीएसटी आरईजी-03 में नोटिस, ऐसे आवेदन को प्रस्तुत किये जाने की तारीख से इक्कीस दिन की अवधि के भीतर जारी किया जा सकेगा।",

(iii) उपनियम (4) में, शब्द "देगा" के स्थान पर शब्द "सकेगा" और शब्द "करेगा" के स्थान पर शब्द "कर सकेगा" प्रतिस्थापित किया जायेगा;

(iv) उपनियम (5) के स्थान पर, निम्नलिखित उपनियम प्रतिस्थापित किया जायेगा, अर्थात:-

- "(5) यदि उचित अधिकारी कोई भी कार्रवाई करने में असफल रहता है-
 - (क) ऐसे मामले में जिसमें कि किसी व्यक्ति की आधार संख्या का अभिप्रमाणन सफलता पूर्वक हो जाता है या वह धारा 25 की उपधारा 6(घ) के अंतर्गत अधिसूचित है आवेदन को प्रस्तुत किये जाने की तारीख से तीन कार्य-दिवस के भीतर; या
 - (ख) ऐसे मामले में जिसमें कि कोई व्यक्ति, जो कि धारा 25 की उपधारा 6(घ) के अंतर्गत अधिसूचित व्यक्ति से भिन्न है, नियम 8 के उपनियम (4क) में यथा विनिर्दिष्ट आधार संख्या का अभिप्रमाणन की प्रक्रिया में असफल रहता है, तो उपनियम (2) के परंतुक के अंतर्गत यथाविनिर्दिष्ट अवधि के भीतर: या
 - (ग) ऐसे मामले में जिसमें कि ऐसे व्यक्ति ने आधार संख्या के अभिप्रमाणन के विकल्प का चयन नहीं किया है, आवेदन की प्रस्तुत किये जाने की तारीख से इक्कीस दिन की अविध के भीतर: या
 - (घ) उपनियम (2) के अंतर्गत, आवेदक के द्वारा प्रस्तुत किये गये स्पष्टीकरण, सूचना या दस्तावेजों की प्राप्ति की तारीख सै सात कार्य दिवस के भीतर,

तो रजिस्ट्रीकरण के लिए किये गये आवेदन के बारें में यह माना जायेगा कि उसे अनुमोदित कर दिया गया है।"

नियम 25 में 4. उक्त नियमों में, नियम 25 में, 21 अगस्त, 2020 से प्रभावी, "असफल होने के संशोधन कारण" शब्दों के पश्चात् "या आधार के अभिप्रमाणन के विकल्प का चयन न किये जाने के कारण" शब्दों अतःस्थापित किया जाएगा।

आज्ञा से, सौजन्या,

सचिव ।

In pursuance of the provisions of clause (3) of Article 348 of the Constitution of India, the Governor is pleased to order the publication of the following English translation of the Notification No. 690/2020/5(120)/XXVII(8)/2020/CT-62, dated September 16, 2020 for general information.

NOTIFICATION

September 16, 2020

No.690/2020/5(120)/XXVII(8)/2020/CT-62--In exercise of the powers conferred by Section 164 of the Uttarakhand Goods and Services Tax Act, 2017 (Act No. 06 of 2017), the Governor, on the recommendation of Council, is pleased to make the following rules to further amend the Uttarakhand Goods and Services Tax Rules, 2017, namely:--

The Uttarakhand Goods and Services Tax (Tenth Amendment) Rules, 2020

Short title and Commencement

- (1) These rules may be called the Uttarakhand Goods and Services Tax (Tenth Amendment) Rules, 2020.
 - (2) Save as otherwise provided, they shall come into force from 20th August, 2020.

Amendment in Rule 8

2. In the Uttarakhand Goods and Services Tax Rules, 2017 (hereinafter referred to as the said rules), in rule 8, for sub-rule (4A), the following sub-rule shall be substituted with effect from 01st April, 2020, namely:-

"(4A) Where an applicant, other than a person notified under sub-section (6D) of section 25, opts for authentication of Aadhaar number, he shall, while submitting the application under sub-rule(4), with effect from 21st August, 2020, undergo authentication of Aadhaar number and the date of submission of the application in such cases shall be the date of authentication of the Aadhaar number, or fifteen days from the submission of the application in Part B of FORM GST REG-01 under sub-rule (4), whichever is earlier."

Amendment in Rule 9

In the said rules, in rule 9, with effect from 21st August, 2020,(i) in sub-rule (1), for the proviso, the following provisos shall be substituted, namely:-

"Provided that where a person, other than a person notified under sub-section (6D) of section 25, fails to undergo authentication of Aadhaar number as specified in sub-rule (4A) of rule 8 or does not opt for authentication of Aadhaar number, the registration shall be granted only after physical verification of the place of business in the presence of the said person, in the manner provided under rule 25:

Provided further that the proper officer may, for reasons to be recorded in writing and with the approval of an officer not below the rank of Joint Commissioner, in lieu of the physical verification of the place of business, carry out the verification of such documents as he may deem fit.";

(ii) in sub-rule (2), before the Explanation, the following proviso shall be inserted, namely: -

"Provided that where a person, other than a person notified under sub-section (6D) of section 25, fails to undergo authentication of Aadhaar number as specified in sub-rule (4A) of rule 8 or does not opt for authentication of Aadhaar number, the notice in FORM GST REG-03 may be issued not later than twenty one days from the date of submission of the application.";

- (iii) in sub-rule (4), for the word, "shall", the word "may" shall be substituted;
- (iv) for sub-rule (5), the following sub-rule shall be substituted, namely:-
- "(5) If the proper officer fails to take any action, -
 - (a) within a period of three working days from the date of submission of the application in cases where a person successfully undergoes authentication of Aadhaar number or is notified under sub-section (6D) of section 25; or
 - (b) within the time period prescribed under the proviso to sub-rule (2), in cases where a person, other than a person notified under sub-section (6D) of section 25, fails to undergo authentication of Aadhaar number as specified in sub-rule (4A) of rule 8; or
 - (c) within a period of twenty one days from the date of submission of the application in cases where a person does not opt for authentication of Aadhaar number, or
 - (d) within a period of seven working days from the date of the receipt of the clarification, information or documents furnished by the applicant under sub-rule (2).

the application for grant of registration shall be deemed to have been approved.".

Amendment in Rule 25

4. In the said rules, in rule 25, with effect from 21st August, 2020, after the words "failure of Aadhaar authentication", the words "or due to not opting for Aadhaar authentication" shall be inserted.

By Order,

SOWJANYA,

अनिल सिंह, अपर आयुक्त राज्य कर, मुख्यालय, देहरादुन।

पी0एस0यू0 (आर0ई0) 40 हिन्दी गजट/532-भाग 1-क-2020 (कम्प्यूटर/रीजियो)।



सरकारी गजट, उत्तराखण्ड

उत्तराखण्ड सरकार द्वारा प्रकाशित

रुड़की, शनिवार, दिनांक 07 नवम्बर, 2020 ई0 (कार्तिक 16, 1942 शक सम्वत्)

भाग 8 सूचना एवं अन्य वैयक्तिक विज्ञापन आदि

सूचना

मेरे पिता बख्तावर सिंह के SBI म्यूचुअल फण्ड नं0 17210776, 16638967 में मेरा नाम त्रुटिवश घर का नाम अज़य सिंह दर्ज है जबकि मेरा वास्तविक नाम अर्जुन सिंह है। मविष्य में मुझे अर्जुन सिंह पुत्र बख्तावर सिंह नाम से जाना जाये।

समस्त विधिक औपचारिकताएं मेरे द्वारा पूर्ण कर ली गई है।

अर्जुन सिंह पुत्र बख्तावर सिंह निवासी ग्राम व पोस्ट नकोट, तहसील टिहरी जिला-टिहरी गढवाल (उत्तराखण्ड)

पी0एस0यू0 (आर0ई0) 40 हिन्दी गजट / 532-माग 8-2020 .(कम्प्यूटर / रीजियो)। मुद्रक एवम् प्रकाशक-अपर निदेशक, राजकीय मुद्रणालय, उत्तराखण्ड, रुड्की।